

FROM DUDE TO DAD:  
A STUDY ON PRENATAL FATHERHOOD AND ITS REPRESENTATION IN THEATRE

by

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## **ABSTRACT**

A man in the preparatory phase for parenthood with his first child can go through a lot of extreme emotional highs and lows, depending upon the man's economic, relationship, and physical status, as well as community pressures and support. In preparation to portray an array of prenatal fathers in a showcase of scenes, I have read an assortment of plays and scholarly sources. In reading a large sample of prenatal plays, I have extracted several possible emotional changes within a man's psyche. I also analyzed the social rationale behind these changes through the writings of sociologists and other scholarly sources. In addition to this research, I was going through my journey toward parenthood at the initiation of this research, as my child was born half way into the project. With the exploration of theatrical literature and sociological research paired with my personal experience of going through the prenatal phase, I have documented the changes a man may experience in his emotional growth. This time is full of differing anxieties that spring from the anticipation of change, while a man is preparing for parenthood. Through the medium of a showcase of theatrical scenes that are representations of the prenatal father, I explore the emotional journeys of several of these men and document my findings. As actors in theatre, we use the emotional life of characters to enlighten our choices in actions and tactics. These tactics are in service to the selfish goals we have as characters. The emotions the character has may act as either a driving force or an obstacle in obtaining our goals. When exploring the emotions of a pre-paternal man, one must consider all the variables in the creation of these emotions. In this project, I extract the emotions that a prenatal father may be vulnerable to and document for personal use as an actor presenting pre-paternal characters.

I am dedicating this thesis to

My son, Orion

for being the inspiration for this project

well before he was born

AND

My wife, Celcey

for being the catalyst for getting things done

even when I'm sure it can be put off until later.

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## INTRODUCTION

When a man is in a preparatory phase for parenthood with his first child, he can go through a lot of emotions because of the transition. These emotions have a rollercoaster effect for the man during his preparation for parenthood and range from extreme highs and lows, depending upon the man's economic, relationship, and physical status, as well as community support. As actors in theatre, we use the emotional life of characters to enlighten our choices in actions and tactics. These tactics are in service to the selfish goals we have as characters. The emotions the character has may act as either a driving force or an obstacle in obtaining our goals. I argue that the emotional life of fathers prior to the birth of their child is complex and full of distractions and anxieties. The prenatal father should be carefully discovered in his presentation in theatrical performances through the clues given by the playwright and the actor portraying him should integrate societal norms and pressures of the time in which the play is presented. I use this document to present my findings of what the emotional life of a prenatal father can be, and how I can use these findings when portraying pre-paternal characters.

I explored and documented the emotional range – according to the writing by playwrights in dramatic literature, the socio-political findings in academic research, and pregnancy self-help books. As this exploration took place during a time when I personally was preparing for fatherhood, I will also use my experiences to support or add to these findings. I recognize that I look at prenatal fatherhood in a different light than another actor who has not experienced that change. These findings and exploration have taken me through the lives of several individual experiences that specific men or groups of men have recognized as emotional growth within these studies and plays. For this thesis project, I dissected these findings in order to use their



experiences as an actor portraying these men in performance within a showcase-style presentation of differing pre-fatherhood tales written for the theatre.

As an actor and a former father-to-be, I have often reflected on the topic of prenatal fatherhood as a theatrical topic. I have been immersed in the land of new fathers and now can use more pertinent substitutions, when portraying prenatal fathers as an actor. As an actor prepares for the character he/she will portray, there are many considerations that he/she must traverse to create a fully developed character: The actor must fashion the character from the given circumstances specified by the playwright and build upon them with social research and personal connections. What does it feel like to be a prenatal father, and what emotions may a prenatal father go through? Does the playwright help with the reasoning of the emotional life of the character? How can the actor build upon the given information within dramatic literature? These questions are starting points upon which an actor can build an emotionally full character.

I would suggest that acting preparation begins at the auditions and/or casting. This development is primarily based on what the playwright informs the actor based on dialogue and stage directions (depending upon the playwright, as some stage directions come from the first production notes). The actor then needs to look at the relationship he has with the other characters within the play as well as his relationship with the environment and time: does the character have a disdain or joy over his/her current living situation? Does the character have any critical time frames in which he/she needs to carry out a task? After developing the relationship with others and the environment, the actor needs to find out what possibilities his/her character may do and keep these possibilities in his/her arsenal for rehearsal purposes. The more choices an actor has at his/her disposal the better prepared the actor will be at rehearsals and the stronger

the character development will be. The actor may have personal connections to the character and in finding these connections he/she may find difficulty in keeping an objective view depending upon the length of time from this personal connection.

Although there are many diverse types of pregnancies, for the sake of the current research, I focus on coupled pregnancy, that is, pregnancy with a present and involved father/partner. I am going to use the traditional (nuclear) family as a model for the writing, using such terms as “fathers,” “mothers,” “family,” and “couples,” but I recognize the fact that many families are single-parent, foster or adopted parent(s), legal guardian parents (aunts or uncles or grandparents), and same-gender-parents in their makeup. Parenting comes in many forms, and much of the research is common across the board. According to clinical psychologist Jerrold Lee Shapiro, as he introduces his book *Becoming a Father*, “There are more divorced, single-parent, dual-career, blended, and same-sex-couple families than ever before. Though the main responsibility for child rearing still remains with women, more men have been drawn into active fathering roles” (xxi).

### Chapter Breakdown

Since this thesis explores the emotions and life of prenatal fathers in theatrical texts by analyzing plays directly dealing with male characters going through prenatal parenting, compiling research presented in sociological studies of prenatal fatherhood and self-help pregnancy books and adding to the findings my personal journey and struggles as a father in preparation for fatherhood, the subsequent chapters will be fashioned in a way to explore the possibilities of the emotional pre-fatherhood and have been utilized in preparation for a devised theatrical pre-paternal showcase.

The first chapter will begin with the given dramatic literature as explored within my findings. What do playwrights say about prenatal fatherhood? How do they present these men as emotional beings? I have read over forty plays with these types of characters, and my findings explored many different points of view from various playwrights about prenatal fatherhood. I argue that playwrights capture the depths of the emotional character a man can reach in his pre-paternal journey. This chapter will look at the given information found within the plays; it does not include scholarly dramatic studies, due to the inexistence of such studies of prenatal fathers in dramatic literature. Rather, this chapter is designed to fill this gap in dramatic scholarship.

In the second chapter, I analyzed the social and political data given by academics within sociological studies, academic and medical findings, and pregnancy self-help literature. This chapter explores crucial considerations an actor may want to understand when creating a pre-paternal character. There are numerous books and articles on the shifting mentality of men in their pre-paternal preparation for child rearing and support. Some of the books on the sociological implications of pre-paternal development, complications, anxiety, and depression include the scholarly texts *Involved Fathering and Men's Adult Development* (2002), *Alternadad* (2007), *Becoming a Father* (1995), *Nurturing Dads* (2012), *Fatherhood: Philosophy for Everyone* (2010), and *Throwaway Dads* (1999). I have examined self-help literature, such as *What to Expect When You're Expecting* (1984; now in its fourth edition), *The Baby Bible: The Complete Guide to Your Baby's First Year* (2009), *Crash Course for Dads-to-Be: Prepare for the Adventure of Your Life with Real World Advice from Real Dads* (2014), and *The Expectant Father: The Ultimate Guide for Dads-to-Be* (2015) to understand from where the emotional support for these men comes. The findings within this depth of study are compared in relation to the theatrical findings and brought into an actor's perspective.

The third chapter examines my experiences as a prenatal father and will be analyzed as qualitative narrative research in conjunction with the theatrical and socio-political findings as a tool toward performance. The journey is personal and may not be a universality for prenatal fatherhood characters. I explore my personal story for the actor's use within my devising of a showcase of prenatal fathers. I lay out some of the anxieties I experienced and analyze their use as an actor. This story explores the emotional details of my journey in a way that allows me, as an actor, to extract emotional truth to add to my character development arsenal. This story may not be applicable to all pre-paternal characters and is simply an exploration of pre-paternity.

In the fourth chapter, I explore how I devised a showcase of prenatal fatherhood. This explores the process of creating, casting, and shaping/rehearsing a showcase of prenatal fatherhood scenes. Through the activity of performance of these dramatic scenes and my personal life experience, I draw parallels in research to my work as an academic, a performer, and a father. As an actor in this project, I have discovered more about my limitations as a prenatal father and have explored many more situations than the typical pre-paternal man. My explorations of prenatal characters in addition to my own experiences exposed me to a larger breadth of pre-paternal experiences that helped to enrich my understanding of the role of the father-to-be. I also found when my emotional barriers would interfere with the explorations, giving me a more challenging task of navigating new emotional ground.

I conclude the thesis, exploring whether my recent experiences of becoming a father has bolstered or complicated the project. This thesis explores the emotional rollercoaster that a father has in preparation for parenthood and is a collection of my findings on a journey that has many "ups" and "downs". The emotional life of a prenatal father is presented in its variant forms

within this document and needs the details to fully explore the “why” and “when” emotional questions on an individual basis. There are several possibilities for pre-paternal emotional reasoning but, as in most statistical data, the sum is determined by the inherent variables and, I would add, the timing of said variables as it deals with emotions within the life of a man.

## CHAPTER ONE: THEATRICAL PRE-PATERNITY

Playwrights have creative license to create their characters according to whatever best will serve the story they are trying to convey to their audience. They place indicators within their texts which serve the actor portraying those characters. I analyzed those clues given by playwrights that gave me further insight into the emotional journey for pre-paternal men. I was limited to the theatre intended for English-speaking audiences, and I recognize that the plays I have read are only a sample of the thousands of plays that may have prenatal characters but for some reason were not located during my database searches. Despite these limitations, I have done extensive research to find the playwrights that have utilized the prenatal characters in their writing. The playwrights that I have located have variant writing styles and cover a large sample “prenatal fatherhood situations” over time. In reading over forty plays for this project with pre-paternal characters, I have been able to make strong conclusions about what I’ve discovered about how emotions affect prenatal fathers within the texts presented by playwrights.

A playwright captures the emotional life of a prenatal father by writing bluntly about the circumstances in which the character is found. The circumstances are revealed through stage directions and written dialogue spoken both by the prenatal character and other characters in the play. The playwright has an individual in mind, and while that individual is only a sample subject within a circumstance, the playwright unveils the emotional state of a pre-paternal man. The playwright uses his/her research and knowledge to display specific prenatal traits for the character and bring that character from a generalization of pre-paternity to an individual within specific pre-paternal traits.

In this chapter, I have documented the sentiments of several of these pre-paternal men as presented in the plays to discover the emotional journey a man goes through as he becomes a

father. For many of the plays I have read, men have an awakening when they discover they will become fathers. The prenatal father becomes more sensitive to his everyday fears and joys. Some prenatal fathers change their demeanor while the existing demeanor in others is accentuated by the playwright: when certain playwrights choose a fickle or insecure man to become a pre-paternal father, they write his manner either to become more straightforward or his fickle behavior or insecurity is exaggerated; and when the playwrights choose to write a strong man, the playwrights I've found make him uncertain and imbalanced upon discovering his new role. While the initiation of this change does not appear to be instantaneous for all plays in the study, there are strong shifts within the characters.

#### Demeanor Change

For some men, the change is not instantaneous, as in *Christmas on Mars* by Harry Kondoleon (1982). In this play, we see Bruno's assumptive demeanor accentuated prior to changing. He starts off the play assuming Audrey will like the apartment and allow her estranged mother to help sign for the lease. Bruno has told a friend that he and Audrey are engaged although he hadn't proposed yet. Audrey reveals the pregnancy and Bruno proposes:

A baby! Audrey, you aren't joking, are you? No, of course not! A baby! It isn't anything I've thought about but I suppose it's something I've always wanted and thought about without knowing it. A little baby, to hold and play with and dance around. Happy? —I'm ecstatic—of course this means we can marry— (59)

Without responding to his proposal, the engagement is assumed along with the apartment.

Kondoleon writes Bruno as this suave character who talks his way through many situations to get his way. Bruno maintains this assuming nature clear up until the end of the play, where he asks

Audrey again to marry him, but this time waiting for Audrey to make the decision (108). Bruno has changed his demeanor to include others in his decisions by the end of the pregnancy, showing that even the most stubborn of personalities have the capability of changing for the betterment of parenting. Kondoleon wrote this prenatal character to be headstrong and impulsive without thought of those he has affected in his decisions and allowed him to change in waiting for the response at the end of the play.

Another example of a man that does not appear to change until late in the pregnancy is in *Knickerbocker* by Jonathan Marc Sherman (2008). In this story, Jerry is trying to reconcile with his future by spending time in a location that reminded him of the past, his regular booth at his favorite restaurant. Sherman writes Jerry as a man who tries diffusing the tension of his impending fatherhood by joking around. Melvin, who has already become a father, comes in and describes the “indescribable” feeling of stepping into fatherhood like a first kiss:

MELVIN. Describe your first kiss. [...] I don't want the date, or the location, or even her name. I don't care about it being a news report. I want adjectives that reflect how you felt. Describe it.

JERRY. Umm, amazing; awesome; groundbreaking; heart-racing; heartbreaking; heart—

MELVIN. Okay, well, here's the problem: Becoming a father is all of those.

JERRY. It seems it is describable after all.

MELVIN. Hold on. The problem is, becoming a father is all of those, but your first kiss no longer is. The same words that you've used adequately describe



every feeling in your life up to this point, those words are ones in your brain, so you're gonna use them to describe being a father. Except you're only gonna use them because you don't have better ones. So the thing is, if being a father is awesome, well, what was your first kiss, really? But if awesome is the right word for your first kiss, then you've gotta invent a new one for being a father. It's a vocabulary issue. (11)

Melvin's speech is a wonderful use of literary similes to explain why becoming a father is indescribable. It deals with the seemingly simple idea of vocabulary shift: having offspring alters the system within a person's vocabulary in a way that is difficult to explain. Sherman does a marvelous job using Melvin to lay out the thought clearly and measurable.

Jerry is written to be skeptical of the parenting tradition of talking to the stomach of his partner as if the child could understand his words. The final scene of the play shows Jerry accepting the loss of frequenting his favorite booth at the restaurant. Sherman also uses this scene to explore the prenatal communication parents have with their preborn infants. Jerry's wife has wanted him to speak to the baby before and, in the final scene, Jerry is finally giving into his wife's desire for him to speak to their unborn child (52). Jerry is partially doing this for his wife and partially speaking to the child as a vocal manifestation of his hopes for the child. After pretending to be ready for parenthood the entire play, Jerry willingly admits he is not ready.

In *Little Footsteps* by Ted Tally (1986) we see pregnancy bringing out the worst in a man. Tally begins the play with Ben and Joanie being cooperative and helpful to each other. Joanie is painting while Ben is trying to understand his role in this entirely new life of becoming

a father. The pregnancy has been frustrating him and he lashes out and tells her that she should have gotten rid of the baby:

JOANIE. Get out of here. [...] I mean it, Ben! You're obviously hysterical, so just get out of my sight. I'll paint by myself.

BEN. *(He rummages through the box, finding a can of black paint and a sponge brush. He pries the lid off the can with a screwdriver.)* Oh no—no—we're having the baby together, let's paint the room together! Only let's not do all these birds and rainbows and shit—all these cutesy little butterflies [...] Let's paint some stuff our kid can really learn from, huh, Joan? What do you say? [...] *(He starts for the wall, she tries to grab his arm, but he pulls away from her. [...] and paints a fat, ugly dollar sign over her butterfly.)* You're never too young to learn that one... *(For a moment Joanie is almost too stunned to react. Then she begins to scream, again and again, pausing only to gasp for breath. He crosses to the far wall, shouting over her.)* Or how about this? How about for this decoration? *(He paints the outline of a heart, then slashes a savage diagonal break across it.)* A broken heart? Good to know? Or how about—oooh! —a big—fat—juicy—black—MUSHROOM CLOUD?! *(Moving in frenzied jabs, he paints a huge mushroom cloud over Joanie's rainbow. Then he hurls the brush against the floor furiously...)* (34)

This outburst seems to have come out of nowhere, making his actions antagonistic. This outward display shows the inner turmoil this prenatal father was going through in preparation for parenthood. Ben had never planned to become a father, and Joanie has pressured him into

fatherhood. The overwhelming anxiety and frustration have pushed past Ben's personal filters and given him an irrational response that overwhelms him and concludes the play's first act in a way that both shocks and excites the audience. Tally uses Ben's heated moment of weakness, where Ben said things he may not have meant at the time, to escalate the end of the first act and now to see if he can be redeemed, the audience must return to see the next act. The audience may not like the way Ben handled himself at the end of the act, but in the second act Tally presents Ben as trying to remedy his mistake of leaving. Sometimes men make huge mistakes in their pre-paternal journey and need to take responsibility for them. Tally writes Ben as abandoning his partner mid pregnancy: Ben left Joanie and did not come back until postpartum, missing his opportunity to be a primary support for his wife.

There are many ways in which a man changes in preparation for his fatherhood role. It is a huge generalization to say that change is inevitable in prenatal parents, however, the type of change is circumstantial, as seen in these three examples of prenatal men. Each person is shaped by their own circumstances and situations. As an actor, the need to understand each character's reasoning for demeanor change is increased and the more I know about the character and situation the fuller the character will be in a presentation. Actors need to use as much information as they can to bring life to the characters they portray.

### Fear of Inadequacy

As we have seen, plays capture the anxiety and depression in prenatal fathers. Some prenatal fathers suffer more than others in plays. I have found that the men who struggle to produce offspring are more depressed and anxious than other prenatal fathers. Prenatal fathers who cannot produce suffer a deeper form of depression than they are comfortable with and

therefore can be hostile without true cause, in a comparable way to men who are against having children being hostile to their partners when finding out about a pregnancy.

Tim, in *The Good Father* by Christian O'Reilly (2002), is an infertile man who was tricked into becoming a prenatal father. O'Reilly writes Tim as "awkward" and "out of place" and begins the play with Tim "drinking quickly in a futile effort to lose his self-consciousness" (9). He meets Jane, a headstrong woman who wants to forget a past boyfriend, at a party and six weeks later, Jane returns to break the news of the pregnancy. Tim is socially awkward until Jane breaks the news of being pregnant. Unknown to Jane, Tim was diagnosed as infertile by his doctors: "I'm not your man... Look, all I can say is for 100% definite—it can't've been me... I don't know you, I don't know what your game is... It wasn't me. (*He exits. Blackout.*)" (18-9). At the point of paternal revelation, O'Reilly shows Tim reacting quite strongly to the news of becoming a father. While Tim has a good reason to suspect the child is not his, O'Reilly uses his character, Tim, as an example of a man who has a strong psychological and emotional change in his demeanor when hearing the words "I'm pregnant." Jane tries to get Tim to own up to fatherhood but he has no reason to believe her. Men find a strong initial stance upon which they stand based on the knowledge they have at the time, whether it is a strong agreement and acceptance of their paternity or a strong disassociation with the pregnancy or acceptance with the disillusionment of self-deprecation.

Tim explains his brusque behavior in the following scene as he had accepted the impossibility of becoming a father. This was a part of who he was as a person and the news of him becoming a father shattered his accepted reality. This shift in knowledge allows the audience to sympathize with the insecure prenatal father trying to find his footing. Tim struggles scene by scene and, as a reader, I fell for this pre-paternal fool. O'Reilly excelled in laying out a

convincing argument for one truth before shifting the facts. Jane did not know Tim wasn't the father until Tim had revealed his doctor's diagnosis.

The diagnosis of infertility due to an "undescended testis" had deterred Tim from creating any lasting relationships because he did not want people to know he was infertile (20-3). Tim states, "He said it was impossible. Dr O'Neill said it was im— Like I've gotten used to this. He's qualified—he's got his shit together—like people like that don't make mistakes. (*Long pause.*) But he must've made a mistake. That's why I wanted to see you" (25). Tim tells Jane how much he wanted to be a father after he discovered that he couldn't become one.

O'Reilly wants his audience to believe that this (diagnosed infertile) man is the father; he doesn't reveal that Tim is not the father until later in the play after the baby dies during the third trimester. Jane has convinced Tim that he is the father, and he eagerly wants to be a part of the child's life and future. O'Reilly presents Tim as a person growing in parental competence while being infertile. Tim has a lot to lose after his journey toward parenting. O'Reilly allows this shift, revealing that Tim was better suited for fatherhood than the man who impregnated Jane.

Miscarriages are hard to read about because there is a lot of emotional investment put into the expected baby. As a former expectant father, I had moments where the life of my unborn child was in jeopardy and the fear of losing him overwhelmed me. The possibility of losing a child pre-birth is one of the anxieties that hits expecting parents around the world. Miscarriages are common: people lose babies, and there seems to be nothing for the couple to do but to grieve and needlessly blame each other or themselves. Jane continues to blame Tim for losing the child even though there wasn't anything they could do (44). Jane wanted to keep Tim's illusion of fatherhood as a safety net while the baby lived, but once things have changed, Jane reveals that Tim was never the biological father and says:

You wanted to be a father, it was in every breath you spoke. And the kind of father you wanted to be, and the way you spoke about it—like it was a vocation, a privilege, the most special, sacred thing, and I started thinking, Jesus, Harry says burn it in a bucket, but you—you wanted to dedicate your life to it, this child. (47)

Tim had blindly accepted that the doctors' prognosis was wrong and that with Jane, miraculously, he could become the father he always wanted to be. After Jane confesses about the paternity of the child, she tries to free Tim from any responsibility he may have felt. Tim, unwilling to accept this loss, simply states: "His name is Liam. He's my son, my son" (48). This story takes the emotional journey of an infertile man becoming a prenatal father and then throwing it away. The play explores the journey Tim goes through to become a pre-paternal man and also his deep disappointment of being fooled into believing the child was his. He rides his emotional rollercoaster through the gamut of many different scenarios in the play as he prepares for fatherhood. After accepting the loss, he and Jane are willing to try again, despite his infertility. O'Reilly's writing can be viewed as a social commentary of emotional paternity of a child outweighing the biological paternity.

In contrast to the story of the male, Tim, being infertile and ignorant about the paternity of the child, *Expecting Isabel* by Lisa Loomer (1998) is a beautiful story of a couple going through female infertility together. Nick and Miranda want a child, but Miranda is infertile. The two of them are doing everything possible to have a child. They risk everything, losing their financial stability, apartment, and eventually each other. The scene opening the play is Loomer's introduction to the characters' past selves: Miranda is completely pessimistic about having children and Nick is the optimist who really wants a child. They go to the bookstore to get some

literature to help them have better success and discover several things they need to change to become pregnant: “Listen, the book says we should cut out a few things... No coffee ... No cigarettes, and I assume that means no cigars [...] No jockey shorts, no hot tubs, no wine [...] And a cold compress on your scrotum half an hour before sex” (12). This list of things a man should do to assist in the impregnation of the partner is something that seems hard to Nick, as many of the avoidances were listed as his favorite vices in the previous scene. Loomer writes Nick as compliant to life as it comes to him. His attitude shows at what point a nice guy will crack as things continually go wrong.

Nick and Miranda eventually separate due to financial difficulty, they couldn't afford any more pregnancy drugs or tests, losing the camaraderie they had in their relationship. Fortunately for their relationship, these two are unsatisfied with anyone else and need each other, each attempting to cope with life post-separation but failing miserably. They reunite, expressing their frustrations and the struggles they had experienced while trying to be apart. Nick and Miranda reconcile their differences and decide their next steps toward parenthood: adoption. Nick says, “God doesn't play dice with the universe, right? [...] what difference does it make if the kid comes from our bodies, or a test tube ... or ... or if we just adopt?” (39). Loomer shows a couple willing to work together to raise a baby that would be their child in every sense but biology. Parenting is a task for the willing parties to work on, despite biology.

For an example of an infertile man who refuses to adopt, I want to turn to *Subfertile* by Tom Mardirosian (1990). Mardirosian writes Tom as haunted by the environment around him while he is trying to become a father with his wife. There seem to be endless tests given to Tom to see if his sperm “liveliness” and sperm count will improve. He is taken through countless tests

and procedures to increase his procreative ability. His frustration with the test results gives him an altered view on sex, undermining his relationship with his spouse, Jackie. Tom tells the audience, “Sex is like anything else: as soon as it’s a job, it’s work” (39). Tom has been frustrated with sex as it hasn’t produced offspring: “Making love used to be romantic” (33). Mardirosian uses Tom’s pregnancy frustration as a direct line to the audience, bringing them into his pain and anxiety. One frustration Tom encounters is the misperception of men with low sperm counts – “Low sperm count doesn’t have anything to do with erections” (30) – Tom is sexually capable and is even desired by his hairdresser, but his sperm is not “up to par” (10).

This play is full of odd quirky doctors and fun little diagnostic scenes that Mardirosian uses to show the crazy things Tom hears as prognoses to address his low sperm count. Infertile men may get advice from all over, and Tom’s friends and family give him advice to the point that he is frustrated and wants to give up. In a moment of weakness, he tells Jackie: “maybe I don’t want kids. Maybe I hate kids. One came up to me in the park last week and kicked me in the shins because I stepped on his skateboard. I wanted to deck him” (35). He shows a deepening anxiety in the way he has changed throughout this play leading up to this kid on a skateboard. The procedures are getting to him and he simply wants to be free of his anxiety.

Tom does not want to adopt sperm: he won’t give up on the idea of producing offspring (33). Tom keeps trying with the procedures and tests and, although some of the procedures are unorthodox, he follows through with what he is asked to do: his testicles are biopsied; he injects himself with urine from a Himalayan nun; he bathes his testicles in ice-cold water, etc. The audience never finds out if the last test was successful, but knows only that Tom has agreed to keep trying.



In *Ashes* by David Rudkin (1974), we see a man similar to Mardirosian's character going through the gambit of doctors to impregnate his partner. Rudkin writes Colin and Anne enduring the grueling process of infertility tests and procedures. The doctors try to determine the complication in fertilization between Colin and Anne. One Doctor gives Colin the following advice to up his sperm count:

You can help. Use a shower from now, not a bath. Scrap your tight briefs for boxer shorts. It takes six weeks to make a sperm and requires a temperature in the scrotum two degrees lower than that of the body. Which is why in hot weather, you will have noticed, your ballocks dangle. Circulation. So, every morning and every evening for the next six weeks, bathe your testicles in the coldest water, several minutes at a time. At the end of January, go back for another sperm count. Central heating, you know, probably reduces male fertility more than any other factor in the west. I think, also, you should eat less: hunger helps fecundity. (15-6)

In these infertility plays, when a man is going through sperm production issues, he goes from "expert" to "expert" trying anything to remedy his condition. Rudkin writes the Doctor and Guru characters in this script as harsh and unforgiving, which may reflect what the character may feel or be going through. Men who struggle with impregnation have so many different things thrown at them. There are varying techniques that can seem contradictory to help men produce more semen and odd theories on what an infertile man can do to up his chances of producing offspring.

Rudkin doesn't solely write the hardships with infertility but also includes a momentary success in this process: Anne gets pregnant. Unfortunately for the couple, complications make an interesting story and Rudkin writes the two of them struggling to keep the fetus and ultimately

losing it to miscarriage. The audience watches this couple lose battle after battle in the conception process. Anne is three months along when she starts bleeding. She is at risk of miscarriage and is told by the doctor to stay in bed to allow for the fetus to stay attached. Unfortunately, this loss is a part of many families trying to become parents, and Rudkin doesn't shy away from that (44). The desire to become parents doesn't guarantee that anyone will be successful. Colin and Anne got as far as three months prior to losing their child. Colin says, "And such blood. The clots of it, claret-colour, solid-soft. The child is lost. [...] it is now that in the heart the loss takes place" (35). The loss of any pregnancy hits a couple hard, especially one who has been struggling to have a positive pregnancy result as they have. Rudkin writes the frustration they are going through without apology or comedic relief. He says in the foreword to this play:

The clinical processes shown should be at root authentic but reduced to a spare theatrical severity. As to the indignities to which COLIN and ANNE submit themselves, they must not make light of them, nor ever clown them; but rather bring us into a wry factual sharing of them. We might here or there be tempted into a tasteless or ignorant laugh: if so, the character must by stillness deliver any necessary rebuke. (7)

Rudkin is presenting this story as a real situation in which people find themselves. These characters are dealing with the loss of the pregnancy. They went through several procedures to get as far as they did, and unfortunately, it has destroyed the womb in Anne's body, thus barring them from future trials toward pregnancy. They are found unqualified for adoption and have to deal with their loss. Rudkin concludes the play with: "This road must now be abandoned also.

ANNE sees it; in[ward]ly she has known it all along. It is pitiful, but they are released. Their hopes for parenthood lie in ashes, but on some other road must lie whatever is for them” (63-4).

Miscarriages can be hard on a couple, causing them to resort to unconventional means to carry the baby to term. In *The Cortez Method* by Rob Keefe (2012), we see the lengths to which a woman may go to have a child after multiple miscarriages. Sara has been keeping the secret that her husband’s brother, Walter, raped her about the same time she got pregnant. She devises a plan to eliminate Walter from their lives permanently, but in order to accomplish this, she needs to come clean about the rape (48). Bill, who had suspected the child was always his, has been thrown this wild card as Sara reveals the rape to him. He needs to make sense of his life and face the fact that his offspring may not be his but his brother’s offspring. Bill tries to understand the situation, while things escalate in the story. He isn’t sure whether to believe his brother or his wife.

Keefe continues the scene in act two, exploring Bill’s reactions to Sara’s uncertainty about the paternity of their child. Sara kept this from Bill because this baby made it past twelve weeks. She has been waiting a long time for a pregnancy to get this far: “Five miscarriages Bill, five?! Out here things can breathe. 35 acres, Bill. Things grow” (54). After having that many miscarriages, Sara won’t let anyone take this baby away from her. She does not care if it is Bill’s or Walter’s offspring, as long as the baby lives and that Bill is there as the father for the baby.

Bill wants to know if the child is his while Sara does not, she would rather have Bill get rid of Walter for good and assume the paternity of the child. Bill doesn’t think this killed or get killed mentality that Sara has is something of which he wants to be a part. Sara feels justified in protecting her baby but Bill says “I’m not going to shoot my own brother. This is crazy” (53). Sara has planned the murder of Walter by Odette, who is a friend that has been holding a drug

dealing agreement over Bill for a while. Odette kills Walter in a brutal display of self-defense and Bill is supposed to kill her after she takes care of Walter's body. Sara states "After years of being pregnant we can start thinking longer than weeks at a time. Nine weeks and no heartbeat? Eleven weeks? Thirteen that one time [...] And this one takes hold. It's going to last" (58).

As dark as the plot is in this script, I loved the sense of hope that Sara had in justifying these illegal actions. This was an extreme case of a woman protecting her child and future while the paternity was in doubt between her husband and her victim. This was a powerful scene that showed the extreme measures a couple is willing to go through to create a family. The prenatal father in this script, whichever the case may be, needs to decide whether the future child is something for whom he is willing to go to prison to protect. Bill must find a way to look past the murder of his brother if he wants the child to have any hope of having both parents and living a semblance of normality.

Generally, I've found playwrights to have dealt with men struggling with fertility by presenting them as sensitive or volatile. The man's emotional wall is written mostly as paper thin and he is often portrayed as frustrated or aggressive. His patience may wear thinner within the course of his trials in overcoming infertility, and he may lash out impulsively toward his partner in a verbal or physical way. This often causes a communication barrier between the two in the couple. These few plays have shown the volatility of the infertile man's emotions as he is trying to become a father. While some infertile men begin their journey optimistic or indifferent, the preparation for fatherhood may affect the emotional life of these men in strong distinct ways.

### Anxiety for the Future

As I read about all these pre-paternal characters in the plays, it became clear to me that each character had a different outlook toward his future. There were only a few similarities between these men in the many plays: they were expecting or in the process of getting to that stage. When an overeager prenatal father is presented in theatre, he generally has been through rough parenting from his own parents, which we see in many of the men in *Crap Dad* (2004), *Baby with the Bathwater* (1983), and *The Good Father* (2002), among others. While they are eager in nature, it is due to a vindication of the lost past, as in *Baby with the Bathwater* by Christopher Durang (1983). Not all the characters wanted the child, as in the case of Sal in *The Agreement* by Douglas Taylor (1967). He immediately calls for an abortion or separation.

In exploring the preparation that a prenatal father goes through I looked at plays like *An Impending Rupture of the Belly* by Matt Pelfrey (2007). This play deals with a prenatal father trying to protect his home. There is an apparent misunderstanding from Clay when his wife tells him to make the house safe for the baby. Pelfrey writes Clay as a paranoid father-to-be, trying to cope with the reality of his life changes as well as recognizing that anything that has happened to Clay personally could potentially happen to his child. Clay goes all out in preparing his house for the infant in an extreme way, partly because he was attacked years ago and thinks that the world is a messed-up place and it's only a matter of time until something happens in their neighborhood:

I know you've got this "Disney" vision of the world, but that's not how things are going. That's not what's out there. And when it comes, it'll be in our neighborhood too. [...] Terrorism. A ten-point-nine earthquake. Riots. Economic collapse. Dirty bombs. Briefcase nukes. Smallpox crop dusters flying over

Dodgers Stadium. (*Beat*) There are hairline fractures everywhere. And for reasons I don't get, you think there's something wrong with me because I see them. You should thank me. (7)

Clay is trying to protect his family in the way he thinks best. Clay's plans for the house are irrational and unnecessary, exposing what a pre-paternal mind can add to someone already riddled with anxiety and paranoia from his past. For example, Clay has the misconception that his neighbor's dog defecating on his lawn proves that the world is a dangerous place (9). Pelfrey uses this absurd inequation to further his exploration of Clay's paranoia. If Clay doesn't babyproof the house in a specific way that protects him from the possible dangers out there, he feels that his home is open for anything to ruin his home and hurt his family.

I enjoyed the play because it was dealing with something most families try to do: prepare the house for the baby prior to its arrival. Pelfrey plays on the miscommunication couples have when both have differing views on how best to prepare for the infant. For example, there are well-designed little plastic covers for outlets and door handles that can look horrible but are commonly expected to be installed, which I bought as a part of my preparation. I found it interesting that every parent has his or her own absurdities in parental preparation.

Plays like Pelfrey's *An Impending Rupture of the Belly* (2007), including *Manning Up* by Sean Christopher Lewis (2016) and *Noise* by Alex Jones (1997), among others, look at the expectations a father-to-be has in preparing for the future. The child is extremely important to these characters as they are the future for these prenatal parents. Researchers Dr Janice Drakish, Liana S. Leach et al, argue that futurity, in general, is a pressing anxiety on both parties within the couple and can lead to severe pre-partum anxiety disorders and depression (Drakish, Leach). As these prenatal fathers (and mothers) consider the future, their present judgment is clouded by

the indirect concern placed on situations. The new parents-to-be are often lost in what to do in their situation and turn to experienced parents they know and trust. Many new parents turn to their mothers and fathers for answers in parenting only to find that parents try to get things right but often they are making it up as they go. In *Knickerbocker* by Jonathan Marc Sherman (2008), we see Jerry's father Raymond describing his first experience in becoming a parent:

JERRY. (*Pause.*) Have you enjoyed it? Or does it feel like an obligation? Being my father, I mean.

RAYMOND. It absolutely feels like an obligation, and I have enjoyed it more than anything in the world. [...] one day, when you were a baby still, you were crying in the middle of the night, and I went into your bedroom, and took you out of your crib, and gave you a little extra milk from a bottle, and just sat there with you--a little light was peeking in from the hallway, and you just looked into my eyes, and you smiled. You smiled, and you laughed. So I smiled, and I laughed, and that made you laugh more. (*Beat.*) I thought, "I'm not a brave man. But if somebody came in here right now, and it was me or you, I wouldn't hesitate. I'd say 'Take me. Just leave my son alone.'" But I'd be furious, I realized, because I wouldn't get to be there for you if you needed me, I wouldn't get to see you grow up. [...] (*Beat.*) You're about to know what that feels like. Get ready. (47-8)

Sherman takes the character of the father to express the perspective changes a new father will go through, the life of the child overshadowing his own protection. Many playwrights use fathers of parents-to-be to help clarify the changes a father can expect when preparing for fatherhood. In

becoming a parent, there is a shift in perception toward their respective parents and they view them in a more human and fallible way.

### Societal Pressures

As I continued to look at fatherhood preparation, I came across several plays dealing with adolescent pregnancy and preparation. I explored how the supposition of the naiveté and simplicity of thought of adolescent prenatal fathers is written by the playwrights. Once the young men are cognizant of their impending parenthood, I have found there to be a deepening of character in these men. Playwrights have chosen these men to represent the naïve nature of young men trying to make grown-up decisions and are written to be strong-willed and emotionally full characters. The young pre-paternal men presented in theatre can be found desiring to change for fatherhood despite their being denied the opportunity of being involved in the story. Most of these adolescent fathers are, in one way or another, denied the status of the expectant father by their partners, social or religious pressure, or themselves. While these societal pressures are presented as obstacles in young fathers, many of these societal pressures can be found within other prenatal scripts as obstacles to prenatal fathers of all ages.

In *Holly Down in Heaven* by Kara Lee Corthron (2012) we see a young impressionable male, Yager, with a singular mind geared toward pleasure. He is the stereotypical naïve and fickle character one would expect from a teen father, written as “Probably good looking but not too bright” (5). He becomes more than his stereotype once he is aware of his paternity. Yager, 18 or 19, has impregnated his fifteen-year-old girlfriend, Holly (5). He does not know about the pregnancy because Holly keeps this pregnancy a secret. This ignorance keeps Yager at a distance from the situation and makes it easier for Yager not to interfere in the future Holly has planned



for their offspring. This unaware pre-paternal young man sneaks in through the window of the basement. Yager is written in the stage directions as clueless, immature, and childish: “Yager belches at Holly” (30). He is also written to be somewhat forceful in pursuing what he wants: “Yager grabs her and throws her on the couch, tickling the hell out of her. ... Suddenly Yager begins kissing Holly. This becomes intense fast” (33). Without the knowledge of Holly’s pregnancy, Yager is simply the stereotypical young horny man. When Holly refuses his advances, he supposes to have done something wrong. To remedy this wrong, Yager brings Holly a present for her birthday – an expensive doll to add to her collection that he has thoughtfully stolen for her. While hiding in the basement from Holly’s dad, Yager notices something has physically changed with Holly:

YAGER. (*Whispers.*) Have you gained weight?

HOLLY. Yeah.

YAGER. Maybe you should try Pilates.

HOLLY. I’M PREGNANT!

DAD. (*Still off.*) Uh... I know.

(*Yager stares at her silently.*) (62)

Yager is suddenly inquisitive and cannot leave until he knows everything he can about this new position he’s found himself in as a pre-paternal man. Yager’s demeanor of general goofing around at Holly’s expense changes to a demeanor of genuine concern. He wants to mend anything broken between them in the relationship and hopes to be a part of his child’s future: “Can I ever see [the baby]?” (64). Corthron writes Yager as a deeply concerned father-to-be from this point on. Yager is no longer the puerile boyfriend tickling his way past the serious topics, he now is caring and sensitive. He wants to be a dad and thinks that it is as easy as holding a baby.

“I bet you I could be a good Dad,” he says, “I just bet you. I bet you. I bet you I’d be better at it than you. [...] Have you ever even held a real baby? [...] I have. I’m good at it” (65). Yager fears a future without his newly discovered offspring and has an increased determination to be a part of her life, showing that he cares for the baby. He does not know how to behave, knowing only that he can get arrested and charged with rape due to the age of his partner. He is a cautious man trying to be a part of his child’s pregnancy but unable to openly accept the baby due to societal pressures.

Yager is a teen father persisting at being involved in the process. This persistence shows Yager’s interest in parenting despite the disqualifications inherent in his character. Corthron presents Yager as having an oblivious tendency, not knowing Holly was pregnant till she tells him. His emotional life has gone from carefree and reckless to one of persistence and concern. He is sidelined as a prenatal-father character by inherent laws and societal restrictions. He cannot see Holly openly due to his illegal intercourse and also due to her father wanting to “kill” him. These huge obstacles delay his achieving his fatherhood goals. He is consistently brushed off by Holly and is concerned about her emotional health. He tries to use what he knows to help Holly be able to carry the pregnancy to term. Fortunately, Holly’s father catches him only when Yager is needed to help drive Holly to the hospital. Yager’s luck in the timing of being caught prevents charges being filed against him and he is able to be there for Holly in the end.

Another example of societal pressures disrupting a young man from becoming a father is found in *Crap Dad* by Mark Catley (2004). In this script, Catley maintains the readers’ perceptions of the youthful characters as young with their character titles, not using their given names except in dialogue, using “Boy” for Paul and “Girl” for Marie. Paul is presented as a teen rebel that meets Marie in detention. They start spending time together and increase their

intimacy. Wishing to remain childless, Paul has an awakening to his own insecurities as he finds out he is an expectant father. He and Marie often joke around, giving Paul the impression that she is kidding. Marie tells him about the pregnancy and rescinds her statement only to reinstate it once again. Paul says, “Marie will you pack it in! Stop messing with me! Now tell me. Are you frigging pregnant or not?” (56). This adamancy of Paul shows his fear of the possibilities for his future. He is too young to become a father and social protocol would make him give up his life of being a regular teenager. He would have responsibility and would need to get a job. We can see Paul’s fear in the dialogue Marie uses: “I told you and you went a funny colour, so I tried lying, but I knew that I shouldn’t” (56). This needs to be a consideration the actor uses in portraying Paul. He needs to find a reason pregnancy changes his skin color. Clues such as this are needed in creating the character true to the story the playwright intended. Marie doesn’t want to lose their blossoming relationship and rescinds her statement, but the pregnancy the truth and is a part of their relationship and changes the way they treat each other.

Catley toys with audience perception of the story by altering the story dependent upon the characters the narrator is speaking with. Catley writes the pregnancy as an excuse for each of these young teens to leave the relationship, in mirroring scenes. The teen parents in this story want to maintain his or her childish life without changing due to a pregnancy, which leads to separation in this case. Paul is initially written to care about his future with children:

GIRL. I had the twenty-week scan.

BOY. You did what? Why didn’t you tell me? [...] that’s something I should be there for. I wanted to be there for that.

GIRL. I didn’t need you there. [...]

BOY. But I wanted to be there. They’re my babies as well.

GIRL. Oh, congratulations, you manage to come inside me and that gives you entitlements. (57-8)

Marie was vicious to Paul by breaking up during a pregnancy to which he was growing accustomed. Marie tells Paul that she's leaving him for a rock musician and wants to break up with Paul over the fact that she thinks he isn't ready to be a parent with her. Paul argues that he has changed for her and tries to save the relationship:

I tried to be different to be with you. I changed. You said you wanted someone sensitive, someone who could tell you how they felt. And I did, I became the person you wanted, because I'd have done anything to be with you. And now... you want to take it all away from me. Take my babies. Be with someone else. Leave me with nothing. I don't know what I did to deserve this. It must've been terrible and I'm sorry. (59-60)

Paul is shown to be a pre-paternal teen capable of changing his demeanor for parenthood. Paul says that he has changed for the pregnancy and he is insistent to be involved, but she leaves him for a musician. For new parents-to-be, the acceptance of their loss of lifestyle is something many do not take lightly.

In Catley's twist: Paul (Narrator) has been relaying the story incorrectly to gain sympathy and rationale from those around him and the theatre audience. This twist in the story gives Catley the chance to tell both versions of an ugly separation during pregnancy. These stories contrast with one another and vilify the departing partner. Marie asks Paul why he didn't join her for the ultrasound only to be shrugged off. Wanting to maintain his youthful nature, Paul says, "I can't do this. [...] Babies. I'm fifteen Marie. I told you I couldn't do this. Right from the start. [...]" (*Shouting.*) I asked you to get rid! Why... why didn't you? I'm fifteen Marie!" (66). Paul

abandons Marie mid-pregnancy. While some may argue Paul's rationale for being too young to be a parent as sound, he has abandoned his girlfriend in her moment of need. She is left to hold up the care and nurturing of two new lives without the help she had counted upon receiving.

Paul's character can be viewed as a social commentary on the men who alter their story in defense of their action of abandoning their children. Paul wants to appear innocent despite his knowledge of his actions; he, as the narrator, is guiding the audience through his journey toward fatherhood. While the audience is captivated by this innocent portrayal of his past, the truth is revealed, and he must own up to it. Oftentimes, a person does not want to own up to his own mistakes and as actors, we use that as a part of the backstory in presenting the character – something driving the character's decisions but unknown to the audience.

In my next young prenatal father example, *Tuesdays & Sundays* by Daniel Arnold and Medina Hahn (2000), we see another young man refusing to accept the responsibility of fatherhood due to social and religious pressures. William displays fear of his own family finding out he has impregnated someone, thinking that his future is ruined due to having gotten Mary pregnant:

They can't know, they'd kill me. That's why I couldn't see you again. [...] They want me to go to college. They say a social life gets in the way. [...] It was a sin, Mary [...] I thought I was quite careful, Mary. I mean, I tried to do what they all say, to... pull myself out before like [...] No, I was quite careful, Mary. I made sure. (52-3)

William refuses to own up to the fatherhood he has been presented with out of fear of retribution from his family and his church. Arnold and Hahn use this character to present the issues behind William's desire to appear to have followed puritanical abstinence. William is afraid of

confronting his family and admitting his sexual activity. He fears social and religious consequences of owning the pregnancy. William tries to silence Mary as they are hiding from Mary's father and strangles her to death. The baby is born in the struggle between the two parents. William is so fearful of the possible consequences of fatherhood that he drowns the baby before anyone can hear the infant's cry (77-82). This horrible action was driven by puritanical guilt, and William had to accept his reality that his future was at risk if he accepted the responsibility of parenthood. His misguided reality leads him to a criminal act to protect his own reputation and future. Arnold and Hahn have taken this story from the history of Prince Edward's Island, presenting that sexuality and religious guilt for pre-paternal men in the nineteenth century and beyond can lead to grosser crimes.

We see this puritanical or religious guilt not only in *Tuesdays & Sundays* but also in *Spring's Awakening* by Frank Wedekind (1906) adapted into a musical, *Spring Awakening*, by Steven Sater (2006). Melchior has been put into reformatory school because of the sexual descriptions he has written to his friend Moritz, who committed suicide. In Wedekind's original script, Melchior has unknowingly impregnated Wendla and doesn't find out until Wendla has died. In Sater's adaptation of Wedekind's script, we see Melchior's remorse for the loss of the child. It is a loss of the future that Wendla had hoped for them and Melchior feels the loss. Melchior finds out about the pregnancy from a letter Wendla sends while he is in reformatory school for his sexual misdeeds. He escapes the dormitory only to find he is too late.

Societal expectations for many centuries was formulated by religion. These expectations and pressures are not always beneficial to society and can cause misdeeds in the name of religion. Melchior, looking for Wendla's tombstone in the church graveyard, says "Look at this—spend your life running from the church and where do you wind up?" (88). While many

see religion as infallible, Sater and Wedekind have removed infallibility from religion with this story. The antagonist of the story is the church and that is the reason for the couple's separation and demise. This religious rigidity can cause people to do illogical things to protect their "eternal soul." As parenting pressures by religion are strict, many fall victim to religious faults and become resentful, causing guilt anxieties and irrational actions among both partners.

In *Noise* by Alex Jones (1997), we see a different type social pressure with a young father-to-be. Dan is a young man moving in with his young bride, Becky, and dealing with the normal hardships of becoming a responsible adult. Dan is a willing man, looking to be the traditional nuclear family father. He wants to be the provider and protector for his young bride and fill the expectations of being the head of the family. Jones writes these two as scared but also willing to work at becoming parents:

DAN. Am yer scared?

BECKY. A bit.

DAN. Me too—a bit.

BECKY. S' on'y natural, Dan; we'm both young t'be parents, I s'pose. (13)

Jones shows the willingness of this young couple to make ends meet. They are young and impressionable but willing to let things slide should they deem it manageable. While they want that picket-fence life, Dan and Becky have only one issue, their neighbor. This neighbor plays loud techno music at random hours of the day and night. Jones uses that neighborly conflict as a driving force in the plot.

As a young prenatal father, Dan intends to be in cordial to his neighbor in this tale, allowing the neighbor to play loud music at sporadic times throughout the day and night. After allowing this for a while, he needs to help his wife get the rest she needs as an expectant mother

and confronts the neighbor to find some common ground. He wants his young wife and unborn baby to have the rest needed for a healthy start. Dan hopes the kindly reminder of late night decorum for apartment living will be taken without incident, however, their neighbor isn't one to take criticism from anyone. Dan must now try to defend his home and family with the little courage and strength he has. Jones shows the valiant effort Dan is putting forward in attempting to reason with his neighbor, but as much as he has tried to protect his home and family, the neighbor invades and destroys his hope for the future.

*[MATT] turns and begins to hit BECKY. He beats her quite violently. She curls up on the bed, cowering. DAN begins to recover on the floor.*

DAN. Leave her—her's pregnant [...]

MATT. Y' should've thought of that before y' pissed me off. shouldn't yer!

*(MATT closes the door. The adrenaline is still pumping, he is breathing heavily. [...]) He kicks the cot and breaks a spar.) Considered y' pregnant wife! (In DAN's face.) Bastard! Inconsiderate bastard! (He pulls his fist back for a punch. DAN flinches, but MATT simply slaps his face in a taunting, mock friendly way.) Had enough, have yer? (70-1)*

Jones writes this antagonist, Matt, as irrational and violent. This play enraged me; I didn't like the neighbor Matt, as I expect was the intention of Jones in writing the character. There were no redeeming qualities in this antagonist. He invaded the home of this young couple and exerted his dominance with no reason besides his wanting to play his loud music. I applaud Jones for extracting a strong emotional reaction from me as the reader, but I do not imagine myself desiring to see this show more than once. The play does show the failed attempt of a young couple trying to be the nice "traditional family" pregnant neighbors. Dan works while he expects



Becky to learn how to cook and take care of their home. Dan is slowly making progress at work but does not understand Becky's irritability. It isn't too long before Becky reveals her frustration with the music and the play escalates to the fight. The expectations of these two as nuclear roles is crushed by their living circumstance. The neighbor, while antagonistic and possibly the cause of the miscarriage, is not the only reason for the ultimate separation of the couple. Filling the social expectations of traditional roles can disrupt the chemistry in a relationship.

In these few scripts of young prenatal fathers, these playwrights presented them failing as in one way or another due to societal pressures. These many different social expectations can make life difficult for both expectant parties. The playwrights I have found do not represent the teen father as successful in his endeavors to become a father. Yager never got to see Holly more than a few minutes during her pregnancy, Paul abandoned Marie, William killed both Mary and the baby, Melchior wasn't around to stop the forced abortion, and Dan couldn't protect Becky from an abusive neighbor. There are other plays that may have differing failures or trials for the young pre-paternal teen but in these last five plays, the young prenatal father doesn't succeed in his parenting endeavors within societal motivations.

### Conclusion

In presenting these plays in this chapter, I came to recognize my own ignorance of the spectrum of plays out there that deal with this subject matter. I continue to find more titles that have a great connection to pre-fatherhood. From these forty plays, I have discovered some common themes of prenatal fatherhood represented by playwrights. These may include: infertility and the man that wants to become a father but for biological factors he cannot become one, and the father who is overly anxious and wants to do everything right, the unexpected father

wanting to maintain his old life and therefore abandons the mother and child or requests an abortion, and young fathers trying to maintain their youth and prepare for the future while societal pressures restrict their ability to become parents. There needs to be a moving force for the play to draw out these characters successfully. Plays deal with conflict and generally do not have an easy path presented in their stories. Therefore, the plays are full of prenatal anxiety and complications. Many of these plays utilize fear as a driving force in the plot. The path cannot be interesting without hiccups in the way.

The tension needs to be there for the play to maintain conflict and drive the plot. If there is no tension in the prenatal circumstances, the playwrights will not indulge in the story of the pre-paternal man. Examples of these types of plays are all over: *Pericles* by Shakespeare (1608) where the only conflict in his antenatal fatherhood was the storm at sea during childbirth, *Fully Committed* by Becky Mode (1995), where the prenatal father has only three lines in the script describing how far along his partner is, and *Grounded* by George Brant (2014), where the prenatal father isn't present until near birth and not mentioned as a cognizant pre-paternal man. Theatre audiences crave conflict and therefore the pre-paternal fathers lacking conflict are not fully explored. The conflict in a plot keeps the audience invested and gives the story purpose. This doesn't discredit the father who is there and not anxious or overbearing, it only points out the more interesting story to watch when things aren't perfect. I believe playwrights as a whole capture the depth of character a man can have in his pre-paternal journey and not just a singularly minded man. While the emotional life isn't spelled out in full detail within the scripts, the circumstances, dialogue clues, and specific stage directions are given to help the actor portray these men with emotional vulnerability.

## CHAPTER TWO: SOCIOLOGICAL RATIONALE

As I studied the emotional life of prenatal fathers found in theatrical writing, I turned to sociological research and self-help literature to look at the real-life rationale behind those emotions. I wanted to see how the academic community represented the justification for emotional anxiety and elation in pre-paternal men. With this period being a time of great vulnerability for pre-paternal men, I found the sociological reasoning for this emotional awakening to be varied and complex. This complexity is an important recognition as an actor begins to work on his pre-paternal character. While emotional life is experienced by the people living in those circumstances, the actor must find avenues to justify his emotional replication. The imagined circumstances should be based on the facts he discovers from research and dialogue. The research presented in this chapter reveals some of the emotional justifications offered by sociological research.

I will begin by focusing on a well-marketed book for prenatal parents: *What to Expect When You're Expecting*. Although mostly directed to the mother-to-be, the text does include a chapter for fathers-to-be entitled "Fathers are Expectant, Too." While a small section of the book, this chapter is more likely seen by men than any of the studies I will cover later. Unfortunately, this chapter is placed out of chronology a hundred pages post birth. In the case of a mother-to-be reading this book at the pace of her own pregnancy, she may only be sharing insight with her partner as she progresses in her pregnancy. With the placement of the chapter, the partner may not use its information about his own changes until leading up to six weeks postpartum, unless he seeks the information on his own. The placement of this section of the book is indicative that the prenatal fatherhood information was an afterthought for these authors.

While apologetically stating that the book neglects the father up to this chapter, Murkoff, Eisenburg, and Hathaway have written about the generality of fathers having taken stronger supporting roles: “In generations past, a male’s involvement in the reproductive process ended once his sperm had fertilized his partner’s ovum. Fathers-to-be watched pregnancy from afar, and childbirth not at all” (432). While this generality of change is interesting, it does lay out an archetypal father of the past being a man who impregnates and waits until the baby exists outside the womb to deal with the child. Murkoff, Eisenburg, and Hathaway also present an alternative reason as to why a man may be hands off in the pregnancy. The text assumes that some men have the desire to be involved the pregnancy, however, when these men want to help, their partners have found another source of support. The prenatal father may feel replaced by the external support the mother-to-be has sought out. The authors recognize that his “spouse may be leaving [him] out unintentionally; she may not even be aware that [he]’d like to be more involved” (432). It is common for someone feeling excluded from an activity to give up the endeavor of joining in the excitement. Many characters in the pre-paternal plays I have read have verified this type of behavior, i.e. the characters of M in *Lungs* and Ben in *Little Footsteps*.

To assist the prenatal man to find a connection with his partner, Murkoff, Eisenburg, and Hathaway suggest that the pre-paternal father go on the same diet as the prenatal mother. If the father is seeking support for his own emotional issues they suggest he “chat up friends and colleagues who’ve become new fathers recently or chat with other pregnant dads online” (432). There isn’t an established community support expectation for the prenatal man; he must look around him and seek out those that will support him in his newfound fatherhood. The evidence shows that pre-paternal men who do not seek out support can lead them to keep to themselves and become reclusive, not wanting to burden their partners or friends and family with their fears

and desires during this journey to fatherhood. Each case of prenatal fatherhood is a variant combination of fear and desire mixed together. The new father-to-be is trying to relearn his own emotional levels while he desires to maintain some semblance of being the person he was before the pregnancy. This reluctance to accept change is a noteworthy obstacle for the actor in pursuing the character's objective.

### Overarching Anxieties

Murkoff, Eisenburg, and Hathaway give variant hypotheses in regard to the prenatal father's irritability, maintaining that it is common in both mother and father during pregnancy (436). The authors divide pre-paternal anxiety into three probable causes: first, the prenatal father is anxious over his wife's health, second, he is anxious over the health of the baby, and third, he is stressed due to life changes (438-9). The authors establish that other anxieties are sub-anxieties that can funnel from these three main causes. Some sub-anxieties include: fear of not being a good father, fear of having extended family with the new baby too soon or too late, fear of exclusion during breastfeeding, fear of over-bonding or under-bonding with the infant, and fear of sexual intercourse after seeing the child born, etc. (442-8). All these anxieties umbrella under the three main causes and when there are multiple anxieties, the anxieties seem to worsen into more complex combinations of personal and external fears for the pre-paternal man. There is a lot of changes thrown at this pre-paternal man as he is beginning to accept this new role.

To the fears and anxieties that are presented by Murkoff, Eisenburg, and Hathaway, I will add what clinical psychologist Jerrold Lee Shapiro has stated in his book *Becoming a Father*:

Expectant fathers are quite emotional and suffer a host of fears, anxieties, and discomforts. Among these fears and worries about the health and safety of wife

and child, concerns about being a successful protector and provider, anxiety about the effects of the baby on the marital and sexual relationship, and fears about personal autonomy and safety. These reflect the most basic of core insecurities that are felt, yet remain considerably unacknowledged. (11)

These fears are largely in line with Burkoff, Eisenburg, and Hathaway's three pillars of anxiety. Shapiro combines the partner and child health anxieties, while he divides the anxiety of change into financial anxiety, marital/sexual anxiety, and anxiety over independence. In comparing the literature, we see the partial collusion of the anxiety claims between the authors of *What to Expect When You're Expecting* and the analyst in *Becoming a Father*. The analysis work of Shapiro seems to add to the anxiety pillars additional clarity and can deeply benefit the struggling father-to-be. While slightly different lists of umbrella anxieties, these overarching anxiety lists give the reader a partial understanding of the emotional changes these men are going through as they become fathers. It is important for actors portraying these men to discover which overarching anxiety is prevalent within the characters emotional clues and from there extract the subtleties within the umbrella anxiety.

Burkoff, Eisenburg, and Hathaway encourage the father to be a strong supporter of his partner, to be well read up on pregnancy, and they state that he'll feel excluded and should find his own support from those around him. They present that the father will have many different anxieties throughout the pregnancy, but he should know they are only momentary (443-8). I also discovered in researching *What to Expect When You're Expecting* that the edition was updated in 2012, which added the chemical changes that a man goes through (Pedersen and Effron 1).

To obtain the information lacking in my edition of *What to Expect When You're Expecting*, I turned to sociological research and found evidence of chemical changes in the

prenatal father in both estrogen and testosterone, among others. Human development professor Pilyoung Kim and medical practitioner and professor James E. Swain discuss in their article “Sad Dads” how men had experienced shifts in their chemical production during the prenatal stage. They state that the prenatal men’s testosterone levels decrease a few months prior to birth allowing for “lower aggression, better concentration in parenting, and stronger attachment to the infant” (42). Kim and Swain state that the “estrogen level begins to increase during the last month of his partner’s pregnancy” and that “the more involved the father is in parenting, the higher the level of estrogen.” They warn that bonding may be affected by his change in cortisol, stating, “lower levels of cortisol among certain fathers might be related to difficulties in father-infant bonding and associated depressed mood.” “High cortisol levels are generally associated with high stress levels,” so if the cortisol is fluctuant during pregnancy, the prenatal father will go through drastic mood swings (42). The father may experience “a rapid increase of vasopressin receptors in the prefrontal cortex of the brain. This particular brain area is important for planning and organizing appropriate prenatal behaviors” (43). And lastly, they mention changes in the prolactin level: “High prolactin levels are related to greater responses to infant stimuli among new fathers. Thus, a lower prolactin level could cause a father to experience difficulties in adapting to parenthood and thus exhibit more negative moods” (43). Each hormone was natural to the process of becoming a father in those involved systematically in the pregnancy. For example, lower testosterone levels help the father feel a stronger sympathetic reaction to the infant’s needs while lowering his aggression level (42). There are a lot of chemical changes, and each chemical change can clarify an emotional reaction in the men. These chemical changes can be a great tool to consider in character creation: the emotional life may not be logical but purely chemical.

While I explored the severity of the anxiety in prenatal fathers, I found several terms that I had previously associated solely with motherhood: postpartum depression, prenatal anxiety and depression, and perinatal depression. I had heard of the terms postpartum and prenatal but had to define perinatal: “Pertaining to the period immediately before and after birth. The perinatal period is defined in diverse ways. Depending on the definition, it starts at the 20th to 28th week of gestation and ends 1 to 4 weeks after birth” (Medical Definition of Perinatal). These terms of postpartum depression, prenatal anxiety and depression, and perinatal depression are indicative of the birthing complications and emotional life women have suffered through in preparation for motherhood, but paternal depression in these three stages was sparsely documented. In the book *What to Expect When You’re Expecting* the malady was addressed as “anxiety,” a less severe case of fear and psychosis than “depression.” To adequately see the nuances of the emotional life in the prenatal men, one may need to determine the circumstances and conditions of anxiety and fear these men have.

Although fathers are encouraged to be involved with the pregnancy as much as possible, Shapiro argues that “Expectant fathers commonly experience a double-bind: the confluence of two opposing messages. On the one hand, he is invited, encouraged, perhaps cajoled, into full participation in the pregnancy and birth of his children. At the same time, he is clearly given to understand that he is to remain an outsider” (120). This distancing and opposition may cause the father worsening anxiety or even depression, as stated by Marina Schumacher, a medical researcher and practitioner, who proposes that “paternal depression is not a rare phenomenon” (65). She states that many do not see the struggles a father goes through due to his ability to mask or disguise these struggles; often he does not want to appear weak in the eyes of his partner



or in the view of society around him (65). This supposition of machismo displayed by the man may be based on social pressures a man has to be strong and independent.

According to Liana S. Leach in her article “Prevalence and Course of Anxiety Disorders (and Symptom Levels) in Men across the Perinatal Period” in the *Journal of Affective Disorders*, “men’s anxiety within the prenatal period is likely to be influenced by factors such as poor relationship satisfaction, financial burden, poor job quality, being a single-father, low sense of control, [...] unplanned pregnancy, and being a teenage father” (684). There are many different reasons why a prenatal father gets anxious, determining the causes and reasoning in presenting a character may be indicated in the text or may simply need to be a character choice, depending on the desired effect for the audience. Pilyoung Kim and James E. Swain, in their article in *Psychiatry*, explain that there are many manifestations of depression in perinatal fathers: “Depressive episodes include depressed or sad mood, marked loss of interest in virtually all activities, significant weight loss or gain, insomnia or hypersomnia, psychomotor agitation or retardation, fatigue or loss of energy, feelings of worthlessness or guilt, diminished ability to think or concentrate, and recurrent thoughts of death” (38). Leach affirms that these difficulties require immediate attention and intervention as they are damaging not only for the suffering father but for his partner and child (675). These external factors are important to note when analyzing a prenatal character who is unhappy in his pre-paternal condition.

### Disillusionment and Shared Anxieties

Åsenhed et al, who constructed their scholarship of fatherhood anxiety on examining blogs by perinatal fathers, wrote that first-time pre-paternity was “an emotional roller coaster” and that this “metaphor for the expectant father’s experience during the pregnancy” was

consequence of the “men’s emotions, thoughts, and expectations” (1312). Åsenhed continues: “There is a sense of both unreality, which dominates at the beginning of the journey, and reality, which becomes more pronounced as the journey continues” (1312). As presented in this study, Åsenhed claims the adaptations that a man may face in the transition between antenatal and postnatal periods are, much of time, strenuous, and that the transitional time prior to birth has shown to have the largest spike in depression and anxiety in fathers. There are many hills and valleys in this “rollercoaster” of pre-parenting but, as depression is easier to notate and monitor, these researchers tend to focus mostly on depression and anxiety. This anxiety is also a tool for playwrights who are creating tension within a scene and thereby creating thought-provoking conflict for the audience to maintain interest.

The father has many expectations placed upon him as he is preparing for the birth of his child. Clinical psychologist Jerrold Lee Shapiro, with his collaborators, Michael J. Diamond and Martin Greenberg, proposes that we need a “new father” mentality, one that recognizes the entire picture of parenthood. He states in the introduction to the book *Becoming a Father*, “The process of becoming a father often triggers tremendous turmoil for an individual father. It marks his entrance both into the world of parenthood and into a more empathetic appreciation of his own father’s experience” (3). The emotional life of the father has many twists and turns in its resolution through parenthood. Although he is under-researched, this emotional life provides a great growth for the father akin to a “growth spurt” of character. Shapiro, Diamond, and Greenburg argue that this is a time for deep reflection for these new fathers: “For many men, becoming a father creates an existential crisis. Being so close to the beginning of life, they become increasingly aware of its ending” (13). In *The Expectant Father: The Ultimate Guide for Dads-to-Be* by Brott & Ash, Shapiro is quoted stating that sixty percent of the more than two

hundred men he had interviewed whose partners were pregnant had “acknowledged fleeting thoughts, fantasies, or nagging doubts that they might not be the biological father of the child. The majority of these men don’t believe their partners are actually having affairs. Rather,” Shapiro continues, “these feelings are symptoms of a common type of insecurity: the fear that many men have that they simply aren’t capable of doing anything as incredible as creating life, and that someone more potent must have done the job (qtd in Brott and Ash 31-2). There is something within these men that denies the facts and creates fantasies. The evidence shows that these men experience emotional imbalance akin to what a mother may feel in preparation for the new life and, with these emotions, rationale is lost.

Deborah Da Costa argues that, while men’s journey through pregnancy is not studied as thoroughly as women’s, couples depend on support from each other. In her article “Dads Get Sad Too,” published in the *American Journal of Men’s Health*, she states “The mental health of men during the transition to parenthood is a much-neglected area of research. While the transition to parenthood is often viewed as a positive and joyful life event, it can be perceived as a stressful experience, negatively affecting psychological and marital resources for each partner in the couple” (1). She argues that neglecting to acknowledge these needs for fathers can adversely affect their partners. Both need to be healthy and happy to work as a cohesive partnership in this step in their lives (3). Schumacher, in her article, “Bringing Birth-related Paternal Depression to the Fore” in *Women and Birth*, adds to this argument, stating, “When a mother is depressed, there is a reasonable likelihood that the father may also present depressive symptoms” (66). She continues, “Depression in one partner is significantly correlated with depression in the other” (68). While that is valid, optimism and collaboration can bring a couple closer together as they help build upon each other’s strengths. While I can hope for optimism, the correlation of partner

maladies can be seen fairly well in theatrical characters, when the prenatal father is frustrated with his inability to impregnate his partner, she in turn becomes frustrated, as in *Subfertile* by Tom Mardirosian.

If a couple does find depression to be a factor in the relationship, they may look to remedy the condition by conventional and unconventional means. Medical practitioner, Dr. Janice H. Goodman writes in the *Journal for Advanced Nursing*, “A man typically turns to his partner for emotional support after the birth of a baby. When a woman is experiencing postpartum depression, her partner cannot rely on her for support and his own psychological adjustment may be impaired” (31-2). While this is directly addressing postpartum parenting, it may be applied to antenatal parenting situations. The couple may, with or without external assistance, be able to overcome this obstacle and remedy the depression, but it must be recognized and addressed. Men may need to be evaluated for mood disorders, especially when their partners are depressed. As Goodman and Schumacher observe, maternal depression was identified as the strongest precursor to paternal depression (Goodman 33; Schumacher et al, 69). We see this type of shared depression in the play *Noise* by Alex Jones, where both characters are becoming more anxiety ridden as the plot progresses until the climactic moment of confronting their noisy neighbor.

As the couple nears the final stages of pregnancy, things start getting difficult for the father. Unlike the false understanding that depression mostly occurs post birth, Schumacher reports, “The majority of men experience significant distress when their partners are pregnant. The time of maximum distress among men going through the transition to first-time fatherhood happens when their partners are in the early stages of the third trimester of pregnancy” (67). The lead up to the birth is where everything for the father is ephemeral and imaginary. Åsenhed

argues that the turning point in the pregnancy for men is when he is present for the ultrasound; this is “where the pregnancy becomes real; it is something that opens up a new world and also many new expectations” (1312). For other fathers going through this period, life may continue to have a disillusionment with the reality of the pregnancy. They may continue to live in their disillusionment until the actuality of birth, at which point, they can physically hold, see, and feel their babies (1313).

As I continued my study of prenatal paternal depression, I found the most common reason for the deficiency of detail in many of these studies was that most of the paternal anxiety and depression research had low turnout of male participants (Schumacher, Goodman, Kim, Leach, Åsenhed, and Da Costa). Nearly all the studies I had pulled for this project were limited in their participation (15 to 200 participants), except for Ramchandani, who had over 12,000 fathers respond to the inquiry and 8,431 who actually participated in the study (Ramchandani 2201). This deficiency was not only in participation but also in regard to how these data were retrieved. Goodman, in her article, presents that the problem with researching men in this period was that the data for paternal depression were collected and measured within the criteria used for maternal depression (27). She argues that this clinical criterion for analyzing the father is a data collection error but, as of yet, there hasn't been a set criterion agreed upon by clinics for analyzing fathers pre- and post-pregnancy. Schumacher adds in her article “Men may manifest depressive disorders in ways that differ from women, and cannot be recognized by current diagnostic systems” (67). The text shows that the diagnostic systems need to be reevaluated by clinics using the data collected from their paternal patients for use in case-studies. Schumacher continues and observes that “Depression in new fathers is usually problematical to recognize as symptoms can be interpreted as natural anxieties about changing social and financial conditions

(67). Kim and Swain state this inconsistency as the reason studies cannot fully document the prenatal father's struggle: "Remarkably, there is not yet one single official set of diagnostic criteria for [paternal] PPD. Thus, paternal PPD has been defined in various ways" (38). While these two studies are clearly addressing postpartum paternal depression, the issue remains that prenatal depression and anxiety is much more difficult, as it is a period for which there is only unsubstantiated clinical research.

### Evolution of Fatherhood

As I turned my attention to integrate self-help literature, the books that I discovered directed toward prenatal fathers covered much of the same changes found in scientific studies. These books were presented for the layman prenatal father in a way that could be easily grasped for comprehension. In Greg Bishop's book, *Crash Course for Dads-to-be: Prepare for the Adventure of Your Life with Real World Advice from Real Dads*, fathers are taken step by step through the pregnancy in a way that both explains the changes in the partner as well as supporting their own anxieties in a way that doesn't diminish the father or put him into a pitiful state. It explains the resources available that are not always known by fathers, such as websites for advice and support. This text lays out the ways a man can take the challenges of prenatal fathering and how other pre-paternal fathers succeeded in overcoming them.

Greg Bishop, the founder of the New Fathers Foundation, President of Trauma Care of America, and founder of the nonprofit National Foundation for Trauma Care, states in his book that fatherhood is returning to a former state of ideological fatherhood: "The recent emergence of the 'new, involved, nurturing dad' is actually a re-emergence from way back in caveman time. [A] century ago [the] Industrial Revolution came into full swing, which meant fathers were

leaving their homes in small villages and on farms in droves” (4). Bishop states his belief that fathers had more time to spend with their family prior to the Industrial Revolution and that during the Industrial Revolution these fathers started working longer hours to earn more for their respective families. Bishop continues looking at the economic effects of the first fifty years of the Industrial Revolution, stating:

This increasing affluence meant nicer homes with dishwashers and vacuums that made life easier for moms, who were socially constrained to homemaking and child-rearing. [...] Fathers embraced this opportunity to avoid dirty diapers and crying babies, and as our hands-on care diminished, our innate dad instincts went into hibernation. (4)

The increase in work available to men and the innovation of the new appliances gave some families a sense of keeping up with the neighbors, and there was a push by marketing commercial capitalism for these families to compete socially. For the fathers involved, they were devoted to the financial support of this dream while the mothers were devoted to the upkeep and management at home. This division of labor in the household was accepted as a part of the middle- and upper-class American dream. While it gained popularity among the working class, many couldn't support this division of labor in the home. This division has frequently been referred to as the “traditional family roles.”

Traditional nuclear families are considered families whose fathers are the financial support and disciplinarians and the mothers stay at home to tend to the needs of rearing children. To his detriment under societal norms, as the father is seen as the individual who is responsible for being primarily the financial support for the family, he has little to do with the care and nurture of his children. Many early theorists, including Sigmund Freud, alleged that a mother's

bond was exclusively important in the development of children and that the role of the father was to provide financial support alone; emotionally he is supposed to remain detached (see Shapiro xx). Over the last several decades, things have begun to change in respect to fatherhood expectation. Modern fathers in the United States are now expected by their partners, in many cases, to be present and available during the pregnancy birthing process: the appointments with the OB/GYN along with the hospitalization and labor process, etc. The “new father,” as Shapiro names him, is a team-care father, meaning he accepts more responsibilities for the care and nurture of his partner and his new infant prenatal and postpartum (Shapiro xxii). Janice Drakich, professor of sociology, anthropology, and criminology, noted societal treatment of fatherhood as such:

Traditionally motherhood and fatherhood were asymmetrical roles. Mothers nurtured children while fathers provided economic support and disciplinary control. The role of fatherhood did not encompass parenting. Fathers were more a simple presence in their children’s lives than parenting fathers. In fact, images of men parenting were sources of comedy and disapproval. The image of fathers has undergone considerable change. Fathers no longer are perceived as incompetent or uninvolved parents. To the contrary, fathers are now seen as legitimate caregivers and socializers of children. The boundaries of fatherhood have extended beyond that of provider and disciplinarian to include participation in childbirth, nurturance, and the physical care of children. (69)

The modern father is expected by his family to be present at the birth at all costs, among other birthing preparations and events. However, Drakich, among others, does not discredit those who traditionally wait outside the clinic for the child to be born. She only claims that these changes in



male participation for modern families during the pregnancy and prenatal development of the baby have created a healthy familial relationship for the man with both his spouse and child (70).

Popular theorists have presented this evolution of fathering while not fully exploring the reasons for these changes. Dr Jessica Michaelson, founder of Early Parenthood Support, Inc and author of the article “The Progressive Dad’s Dilemma,” offers that the supposition that fathers who are the only financial provider for their families has ended for these “progressive parenting” communities. They are commonly known for having dually-involved-parent families. In the twentieth and twenty-first centuries, the men in these progressive families are taking on more active partnership roles in parenting (1-2). While she misrepresents “progressive,” she describes what many other scholars refer to as the “modern fatherhood ideological shift” (Drakish, Goodman, Shapiro, Brott and Ash).

The overarching idea of “modern fatherhood” after the birth, however, has been changing both socially and politically. Drakish documents the societal change:

Since the late sixties, there has been a sustained focus on fatherhood in social science research. [...] Men’s experience and reactions during pregnancy and childbirth are being examined to better understand the “expectant father,” his role during this period, and his subsequent involvement in childcare. This interest in men’s participation in the prenatal period reflects the increasing presence of men at prenatal classes and delivery and contributes to the construction of men’s nurturing role. (74)

This nurturing and involved father has altered his role as provider and protector. This type of father is homogamous or semi-homogamous in economic standing with his partner, meaning there’s an equal or quasi-equal fiscal responsibility. This poses that many mothers are rejoining

the workplace, increasing the need for fathers to assist in the home. These modern fathers are more involved and nurturing than the traditional father in home life for their children, helping with the cooking, cleaning, and childhood rearing routines. There are more expectations for the involved and nurturing father to be actively aware of the infant's health and happiness before and after birth. This change to dual-income-household fatherhood has been sustained through capitalistic pressures on the household to keep up with the neighbors. With new appliances and the constant need for growing affluence to sustain the needs presented in today's society, it has become necessary to reevaluate the traditional roles of parenting.

A dual-income father and a stay-at-home father are not as rare phenomena now as they would have been twenty years ago. Many sociology books, including Shapiro's *Becoming a Father*, Marsiglio and Roy's *Nurturing Dads*, and Nease and Austin's *Fatherhood: Philosophy for Everyone*, show that men are also taking on a more active role in the rearing and teaching of their children. Some fathers are taking on more of the homemaker responsibilities and societally prescribed responsibilities of the traditional-stay-at-home mother role. This dual-parent homecare life has given fathers joys and hardships otherwise unknown from the industrial revolution to the 20th century American household. While there is a change in roles, many note that the mothers who work outside the home still, in many cases, expend more care in the home than the father while sustaining her part in acquiring the family's financial needs. While she is finding herself in the workplace, the men have been struggling to make the same progress in the home. While it isn't a universal truth to have fathers reluctant to take on homemaker roles, it is quite common for men to be resistant to these changes. Many fathers that are in dual-earner families generally have a keen understanding of their own parenting responsibilities. They understand the on-the-job-training aspect of parenting and welcome the successes and failures in

the process. While the father might be assisting in the home in dual-income homes, the division of household and childcare responsibilities still lies heavily on the shoulders of the mother. There is progression for fathers taking on more in the home, to a degree, but the father hasn't replaced the need for mothers and their importance in a child's life.

The current economic needs of the household in early twenty-first-century capitalism require multiple sources of income in many homes. This shift in focus has important complications when planning for the birth of the child. According to Shapiro:

Shifting family economics have necessitated dual incomes in order to maintain living standards that were once sustained by a single "breadwinner." With both parents working outside the home, the father's role has taken on increased importance as parenting and household responsibilities fall more heavily on both mothers and fathers. As mothers are less available, the opportunity has arisen for men to become more involved in the day-to-day child care. Children can consequently more fully experience the strength and uniqueness of two involved parents. (8)

The responsibility of both parents is essential for succeeding in dual-income homes. This need to have more luxuries, along with the push for equal educational rights and professional satisfaction for women, has created the need for women in the workplace. With the mother is away from the house at her equally time-consuming work, the father needs to pick up some of the duties within the home. These fathers and mothers may communicate their needs more openly and find a compassionate resolve to be successful as parents in regard to work scheduling and shared care of the child. Shapiro suggests that "Today, involved fathers need not see themselves as weak or maternal. In contrast to the standoffish image of the 'strong father,' today's nurturing father adds

much more strength to the family than his old-style counterpart” (xxi). He continues his discussion, noting that this has proven to create a more fulfilling experience for the child, having two diverse and equally present forms of parenting: the child has a mind more conducive toward collaboration later in life and camaraderie among friends and acquaintances (9).

Shapiro believes that it is the women’s movement that prompted the turn to parenting for the father. The movement questioned the “legitimacy and health of fixed roles for parents” (xxi). The inequality of women in relation to men in the workplace is still widely debated; the mindset of gender roles in society still favors men at the workplace and women in the home. The move toward equality means the men will share in the not-so-pleasant aspects of rearing the child. For Shapiro, “Men should acquire as much knowledge as women about the nurturing of children. Many fathers will no longer be spared the mundane duties and pleasures of diapering their infants, bathing them, putting them to bed at night, and partaking of daily childcare tasks” (xix). It is easy for men to recognize these difficult aspects of childcare and use the difficulty as an excuse to avoid parenting, but Shapiro and fathers that agree with him argue that this is a necessary part of the growing equality of the sexes.

The evolution of pre-paternal fatherhood is a crucial factor in the characterization within theatrical portrayal. Depending upon when the play is set, the prenatal father will have differing societal norms and pressures imposed upon him. The growing equality in current gender politics may not be relevant to the character work. The sufficient discovery of these pressures will create easier avenues of detecting the source of anxieties for this pre-paternal character. Without detection, the prenatal father may be presented in a way that does not reflect the intention of the play.

## Conclusion

While many couples have shared their good news, expecting a baby, by saying “We are pregnant,” anatomically this dual pregnancy is incorrect because only one of the couple will be going through the biological and life-threatening process of gestation, labor, and postpartum healing. Columnist for *BMWK* and marriage coach Deborah Mills wrote that “Men have watched their wife give birth going through excruciating discomfort, while they themselves felt helpless because they could not stop her pain. Delivering their little miracle after 9 months of incubation in mom’s womb is something that only she can do” (1). “We are having a baby” is probably a more accurate statement, as the mother is the one going through the biological process of pregnancy, labor, birth, and, perhaps, breastfeeding while the father will not, but this does not mean he won’t be affected in his emotional life.

While many fathers may experience emotional and psychological distress during the pregnancy, some are able to handle the changes with ease. Shapiro, in his chapter entitled “When Men are Pregnant,” states: “although men do not have any biological signs of pregnancy, they often experience a host of emotions and thoughts. Psychologically, expectant fathers are just as pregnant as their wives. He too will soon be responsible for the care of a helpless infant” (120). Shapiro respects the idea of “we are pregnant” in that, as long as men have an increased and active participation in the pregnancy and infant care, they will need care and support from their family and partner through the process. “Pregnancy is a time when a couple desires togetherness and teamwork. If the expectant father remains unaware of the range of his feelings, stifles, or masks a significant portion of those feelings, he will feel further away from the pregnancy, his wife, and their baby” (121).

The emotion life behind prenatal fatherhood is varied in its sociological rationale and has complexities in the locations societal perception of the father's role. It takes a commitment to becoming a parent to seek out help in the forms of books or groups, which can be difficult to the man who desires to hold up his image of not needing assistance. While the sociological research is informative, there is a deeper understanding when the characters are described and presented to a populace via the media of television, film, and theatre. In using theatre as my focus in this study of prenatal fathers, theatre presents individual men going through the process of fatherhood and the sociological research is a way to analyze the "why" for the emotional variance in differing pre-paternal characters. There are many answers to the many differing cases of prenatal fatherhood and, as I continue in this study, I will look at how the research relates to the individual cases I have discovered and cited in the research and play reading about prenatal fatherhood as well as to my own pre-paternal situation as I experienced those emotions.

### **CHAPTER THREE: PERSONAL PRE-PATERNAL NARRATIVE**

As I continue the study on prenatal fatherhood, I have also considered my personal journey and how it correlated to the sociological and theatrical research presented in this study. In this chapter, I lay out the perspective I had during this process, derived from personal journals and emails. These firsthand experiences in the pre-paternal stage of my life shaped my perspective on the ways prenatal sociological research and dramatic literature address the subject of prenatal fatherhood. As this is the third dataset used to present a showcase of scenes addressing prenatal fathers, I will use my experiences to present how this former father-to-be handled his anxieties and emotional complications. I will also look at how I, as an actor, may extract from these experiences to utilize the information in performance.

I, like many first-time fathers, had very little pregnancy knowledge prior to being told that my wife was pregnant. I knew we wanted kids eventually, but the immediacy of questions regarding how I would feel once I was in the pregnancy stage as a pre-paternal man didn't fill my mind until we had the positive pregnancy results. With this knowledge, I had to remedy my ignorance. I had a flood of emotions come up including recollections of missteps and unfulfilled goals. There was a sense of guilt and curiosity as to what I felt toward my own parents. I was more curious about how and why I was raised the way I was brought up. Suddenly there was the inevitability of being depended upon by a child, and I needed to ensure I could do it. While I had the urges to better prepare myself, I also was filled with the need to take risks. While I knew I needed to be cautious and try to understand my changes, I wanted to escape and do something exciting and dangerous. Studies show this escape mentality is a coping mechanism for some men dealing with stress: they desire thrills and danger at the expense of safety (Shapiro 128, Bishop 3, Hathaway 433). This anxiety may also be focused on the study of the prenatal father's condition

to appease curiosity and anxiety. To assuage my desires for danger and adventure, I focused my anxious energy on the research for this project.

Greg Bishop explains the flood of anxiety many men experience as a positive chemical reaction: “Paternal care is an evolved behavior in us men. We get a complex, chemical turbo boost, triggered by hands-on contact with our babies that is genetically programmed to kick start our daddy-hood chemistry and enable us to protect, love, care and provide for them” (3). Bishop recognizes these changes in the many cases he has observed and argues that some men do not treat the baby as a reality until they can hold the infant in their arms. While Bishop’s generalization of this chemical event states the change occurring postpartum, I have found that there are many of these “boosts” within the pregnancy preterm. One example where I found myself experiencing a strong “boost” of emotional growth was during my first visit to the OB/GYN with my wife, Celcey, to see a sonogram. Once the baby was on the screen and I heard his heartbeat, I felt completely unprepared, lost, and excited simultaneously. It was a big transformation in the way I felt about my past and my future wants, desires, and accomplishments. Impending parenthood was emotionally draining due to the anxieties it created. This anxious energy I experienced with the sonogram occurrence was a large push for me. The air around me had changed and I was breathing differently. This seemingly atmospheric change was part realization of the inevitability of lifestyle change, part fear of future failures as a parent, and part joy at the possibilities I would have becoming a father. While my emotional changes during the first sonogram may not compare to the fear and elation I had holding my child for the first time, the experience of seeing the screen blob version of my child moving and hearing his rapid heartbeat for the first time was distinctly imprinted in my thoughts for several months. It was a constant distraction for me from my everyday life as a student and a performer.



For many men, pregnancy is a difficult topic in which to invest due to societal norms of leaving pregnancy preparation to the gender that bears the biological hardship of pregnancy. This lack of early education on parenthood is a disservice to some men. These men fall behind their partners in knowing what to expect and do to keep themselves and the fetus safe and healthy. Granted, it is the women whose bodies carry the baby, and they are therefore prone to want to know how their bodies might change. However, men go through emotional and psychological changes about which they may have no warning should they deny themselves any research on their new position in life and how that role affects them. Without support these unprepared men are prone to anxiety and stress that they could have recognized and avoided.

In laying out my experiences as a man transitioning to fatherhood, I need to begin in the planning stages. During my planning stages, I felt the anxiety of the future as a father as much as I did during the pregnancy. These moments of anxiety were not as frequent as when we had received the due date for pregnancy, but when the anxieties were present, I could feel many of the same anxieties discussed in the research for expectant fathers. From what I have found within my personal records and memories, Celcey and I had not thought much about becoming parents in the first two years of our marriage. We were trying to save for a trip to Europe and for future schooling. We had planned to start our family before she turned thirty, and I felt that we had all the time in the world. I had almost forgotten the goal of parenthood until Celcey's younger sister became pregnant. My wife was suddenly excited about the prospect of having a baby the moment she became an aunt to a little girl. This was the first girl born among her sisters, and my wife was thrilled to start thinking about parenthood. There was no doubting that things would begin to change.

As a couple, we began discussing life timelines: when we would go to Europe, when I should apply for graduate school, and when we would plan to have our first child. Discussing parenthood was hard because I had to consider my childhood habits and joys that would no longer serve me as a parent and stop enjoying many of them to become the older generation. Planning for parenthood can initiate prenatal stress and anxiety well before the child is born. As a man preparing for parenthood, I had plans that were selfish in nature: going to Europe, moving out east, acting in a larger theatre area, graduate school, etc. As my wife was determined to become a parent, she would test me to see if I was ready for parenthood, by volunteering my services as babysitter. For many men, babysitting would be a great test for planning mothers to test their partners' ability to cope with screaming children, but I had babysat so many kids in my life that it wasn't anything new. When we moved away from family to Florida to start my graduate education, my wife made sure to video chat her niece and nephews. She missed family, and I could tell that the time was fast approaching when we would begin seriously to discuss becoming parents. This was an anxiety that grew, not because I felt that I wouldn't want to be a dad but because I wasn't sure I would be able to support children financially. This financial burden is typically understood as the man's responsibility, but I wasn't going to be that traditional father type with my career plans in theatrical entertainment. This anxiety is a continual thought that continues to be needling my emotions due to how many people I associate with that conform to this social norm.

Prior to moving to Florida, my wife and I went to Europe for a second honeymoon and renewed our commitment to work through all the struggles we would encounter in the coming years through my graduate school training. About the middle of my first year of my graduate training as an acting MFA student at the University of Central Florida, Celcey and I began serious

talks of parenthood. I knew it would be hard, but my wife and I agreed that we had our first attempt at pregnancy between my first and second year of my three-year graduate program. The course load for my third year of graduate studies was allegedly lighter, as the graduates in my class would likely intern that last year with the Orlando Shakespeare Theater. My reluctance to allow myself to think about fatherhood had to be mastered because we had agreed to a timeline for parenthood, and I had to let the future shape itself. No time would ever be convenient to become a parent for us, and I had to get over the fear that having a kid would make things hard for me as a student and performer.

That moment we got off birth control and started actively pursuing parenthood was like stepping into an illusionary world. I felt like the tactile world around me had been a safe place, and I needed to embark into the dreamlike, ethereal, and imaginative world of trying to become a parent. I wasn't sure how things would happen. Would I feel more connected to the world once the baby was growing in my wife or would my trancelike view of the world become more clouded? I had the greatest distractions offered a man in this trancelike pre-parental state: sex and theatre. This same fear and distraction was something I saw in many of the plays that I read for this project a year later. After reading this commonality within some of the plays and research, I was comforted by the fact that it wasn't unnatural to have these thoughts and fears. I could relate closely to those men who feared the difficulty of parenthood.

After trying for pregnancy for several months, we nearly gave up, thinking that the timing might be the wrong. I had mixed feelings about the pregnancy: I wanted the pregnancy to happen, but I also thought it might be better to wait a year so the baby wouldn't come until I was done with my graduate degree work. I was full of anxiety just thinking about having someone depending on me as a parent. I was filled with a sense of failure not to have the pregnancy line

up with my wife's plans for maternity leave. We weren't pregnant and the school semester was beginning and I was in another show. Anxiety was building, and I had to figure out how to get past the anxieties I had regarding parenthood, theatre, and schooling. Trying to balance everything was not easy. I felt as I closed one show and began rehearsals for the next that if my wife wasn't getting pregnant that year, we'd be okay. I had almost forgotten that it was still a possibility to have a child during graduate school. If I say that I had some relief in that thought, it would be an understatement. We had a heavier course load that year, and I could let the thought of becoming a father sit until that coursework was completed. I was wrong.

I was in the shower after having a long day of classes and rehearsals when Celcey told me to get out of the shower and showed me the positive pregnancy test. I was shocked and surprised and happy, but I was also exhausted. She was looking for a huge reaction from me and, unfortunately, I was too tired and shocked to let anything out. Unfortunately, this was not a "boost of energy" moment for me because we had gone through so many failed pregnancy tests that I had expended the excitement for this moment. Pregnancy tests had become an expected grocery expense for a while and I couldn't be ready to be thrilled every time she took a test. The revelation was a wake-up call. We were going to be parents, and although I had not appeared excited about this new adventure that night, I was thrilled and scared out of my mind, not out of any desire to avoid becoming a father but out of fear of not being able to be a decent father while focusing on my education. I was dealing with the shock of the reality of it happening concurrently with my education. With my shock and doubts, I had my wife take a picture of the pregnancy test on my phone so that I could verify the results to myself. I was still in a trance the entire week, and I continually second-guessed the reality of the pregnancy. I had the picture of the positive test on my phone, and would look at it periodically throughout that week until we

confirmed it with the OB/GYN. My life was changing and I had to deal with that distraction from my regular day-to-day life. I had wanted to be a father and now, whether I was ready or not, it was going to happen. I felt like M in Duncan MacMillan's *Lungs* where he was claiming to be ecstatic but his words and actions were unemotional.

Becoming expectant parents with my wife was a time of uncertainty for me as my mind was always preoccupied with the infant. As graduate students, we talked about our lives a lot and the grads knew that my wife and I were considering parenthood. In our office between classwork and teaching responsibilities, I looked hard at the test picture on my phone. A colleague noticed my concern and distraction and was trying to diffuse my tension and relax me by making the remark "At least you won't have to worry about becoming a father during graduate school." In a moment of weakness, I looked down at the picture of the test result and accidentally said, "Too late" aloud. Unfortunately for the sake of the secret, I had revealed something I had not intended to reveal. I tried to brush it off and pretend I didn't say anything but soon the entire graduate class knew that I was going to be a father. I swore them to secrecy due to wanting to keep it from social media, and my wife and I were afraid that by revealing it too early we would jinx the pregnancy and end up with a miscarriage. I found secrets to be harder to keep immediately after finding out I would become a father, but it was easier knowing that most of my friends and family lived far away and it was nice to have a few people who knew what I was going through. I had leaked the information and had to trust my class to maintain that secret until Celcey and I were ready to share it. The fear of miscarriage was a definite push for me to start looking into prenatal research. It started as a perusal solely to find answers about miscarriage and eventually became this project. We see, in *Ashes* by David Rudkin, a couple unsuccessfully trying to prevent a miscarriage, which is something difficult to read, knowing that it could have been a

comparable situation with our child. Fortunately, we were never asked to keep my wife bedridden to prevent miscarriage at any time in the pregnancy (as Anne was in *Ashes*).

The pregnancy was verified via ultrasound, and we started going to OB/GYN appointments together. I wanted to go to the OB/GYN with Celcey because it was a way for me both to be there for her as she was going through these changes and to satisfy my need for reassurance that this was all really happening. I was also curious about the prenatal visits: I wanted to know what they did to find out about the baby's progress, as everything was new for me. The ultrasounds were the best help for me because I was in a state of mind that did not know reality from fiction. I thought that if I could just see something that wasn't simply a picture, maybe my surreal mindset would be at ease. Seeing the ultrasound and hearing the heartbeat is where I feel my life as a true prenatal father began and, unfortunately, I could not clear away the delusions of my surreal mindset. Hearing the heartbeat and seeing the moving creature on the screen grounded me in the present reality, and my anxiety decreased. Surprisingly, it was between visits that my anxiety raised. I had expected my anxiety to spike at these visits but it was calming and reassuring to see each ultrasound. There was something about hearing his heartbeat and seeing his form moving on the screen that made me feel like everything was going to be fine. The weeks in between visits were hard and I needed to find distractions from the preoccupation and stress.

Celcey and I needed each other during this time of change. We were looking at the future, and the future was growing inside my wife. We opened up to each other more during this time as we were preparing to become parents together—I include the years of considering parenthood, as well as the months of our pursuit toward pregnancy prior to inception, and group them along with the nine-month pregnancy. We talked about more meaningful things, like what our hopes and dreams for a family were, rather than simply the trivial things, like who had cut us off in

traffic and which groceries were spoiling. We talked more openly about the details of frustration and of our hopes and aspirations. We argued at times and laughed other times during the give and take of our discussion and negotiations for the future for our family. The change in communication was a happy accident that doesn't always happen between couples. We talked more by choice, and our conversations were great for maintaining our sanity and love for each other. We discussed everything about our desires for our new child: sports or dance, homeschooling or public, what environment we wanted for the baby once graduate school was complete, etc. We also speculated on whether it was to be a boy or girl. If it was our choice, what would we choose? And looking further: where would we like to raise him or her? Many couples use this type of conversation to plan how their child will be raised and set expectations for their home and future as parents.

Celcey was teaching full time and refused to let her pregnancy get in the way of her work. I was in the second year of graduate studies, where we are asked to start considering what our thesis performance aspect will encompass both in terms of a research lens and performance content. I had a secret about which my professors did not know: my wife and I were going to have a baby, and as stress and anxiety hit me in preparing for a thesis on top of research classes, I wanted to do something I had a passion for in presenting a topic. I wasn't passionate about the topic of fatherhood, necessarily, until I was confronted head-on with the reality that I was going to become one. I had to discuss revealing it to my academic community as I was considering fatherhood a topic option for my thesis. Celcey was a little nervous about revealing the pregnancy, as we were not past the point that doctors recommend revealing it to family and friends. We were coming up to planning for our third year as a class, and I needed to decide which thesis idea I would capitalize on. I had the desire to study and prepare for fatherhood. I

read about the struggles fathers go through during that time of change and decided that if that was something I might go through, I wanted to know what to expect (now that I was expecting). As the semester was ending, I was given permission to reveal the pregnancy only to the immediate academic community with which I was involved. I told my professors about the pregnancy, and we began talks of switching my thesis topic. This was perfect, as reading about fears in others helped me cope with my own insecurities. As a preparing father, I felt ill suited for the job, but the baby was coming and I needed the excuse to study about prenatal fatherhood to keep me from becoming a wreck.

By Christmas we were into the second trimester of the pregnancy: the safe-to-tell-others stage where most of the risk for miscarriage had past. We then planned on how we would share the news to our family. We had saved enough in the year to see family for Christmas, which we weren't able to do our first Christmas during graduate school. We were also at the point in the pregnancy where we could learn the gender of the fetus. This scared me because we had shared our consideration for gender preference with each other and we could have guessed incorrectly. We feared the baby would hate us if we wanted one gender and it wasn't what came (This is still a fear I have as a father now, knowing that we guessed incorrectly). We wanted to share all the details of our baby with our family in person, so we went in to the OB/GYN to see if they could determine the gender yet. The baby wasn't cooperating with the ultrasound, so, unfortunately, we didn't know before our visit home. While some parents are content not knowing the gender of the baby, we were a little worried because we were hoping to know before we revealed the pregnancy to others.

Breaking the news was exciting and thrilling because we had successfully stayed with family almost a week without spilling the secret of our new addition to the family. There were



many confused looks exchanged because no one suspected anything. We had one mistake which revealed the pregnancy to my wife's sister—we added sprouts to a sandwich and suddenly remembered she couldn't have them. Other than that small mistake, for most of the family, it was a Christmas surprise. There is an excitement in sharing news like this that is both thrilling and confirms the inevitability of the event. I was so glad that family could share the knowledge of our impending parenthood. It was a welcome surprise for my father, who had been hounding us to have kids. In the religious community where I grew up, couples were expected to have children soon and often. Today, many in these religions do not subscribe to that ideal but rather see the benefit of planned parenting. While this social and religious pressure was expected from our families, it had lessened as the years went by. We were in our fifth year of marriage and had known each other two additional years, so the family pressures had not been present when we finally made the leap toward pregnancy.

After expressing our desires for a girl to our family over Christmas, we came home to find out that we were having a boy. We were happy, but I was paranoid with the fear that our family would think less of us for sharing our desires for a girl and we were having a boy. We were really happy to find out we were having a boy and accepted him with love. Because we desired a girl didn't mean we didn't want a boy, contrary to how it may be perceived when couples express their desires for baby genders. We wanted this boy, and we were lucky to have him. There was the fear of the baby discovering that secret desire and what he may think when discovering that expressed wish. My anxiety shot through the roof for that fear alone. I didn't want my son to feel less than wanted because he wasn't the gender we had guessed. If anything, I want him to be a brother someday, hopefully to a sister. We were happy to have him. This dilemma is staged in the play *Expecting Isabel* by Lisa Loomer, where Nick and Miranda are

doing everything in their power to have a girl and when it comes to having a boy, they have to accept and love that boy for who he is.

I was lucky because I could use my research as a therapeutic avenue for my frustrations. I was an absolute mess, psychologically, because I was uncertain what was expected of me during this pregnancy period. Celcey was strong: she never had morning sickness or even took a day off from teaching her entire pregnancy. As we entered the third trimester, I was certain that we'd encounter more struggles. I expected the sexual frustration expressed in the studies that comes with pregnancy. Things were different and there was a fear that sex might be in one way or another affecting the baby. The fear was something shared in many studies, including Barry, Shapiro, Drakish, Ramchandani, Bishop, and Goodman, among others. There is a sense of wanting to protect the child, but the sexual desire is still there. It is also recommended, by our OB/GYN, that couples have sex frequently during the third trimester despite these irrational fears. It is healthy for the cervix during this time to meet the discharge (Women's Center Orlando Parenting Workshop). The OB/GYN class stated that couples that have more sex have an easier labor process and the birth is a little easier for both mother and child.

As April came around, we finally revealed our pregnancy on Facebook. My wife was born on April fool's day, so it's an easy tradition to say something outrageous but mostly true on social media. We took a typical pose of blue painted hands on a white shirt in the shape of a heart, seeing who would think we had photoshopped the picture. The picture turned out quite beautifully. We set up timers on three different cameras and did many takes because announcing our baby had to be perfect in our eyes. It was fun. Celcey also baked yellow cake cupcakes and added blueberry cupcake mix in the middle to announce the gender to my classmates and her coworkers. The reveal was quite perfect and gave us a new excitement for our son. We settled on

a name at that point as well: Orion. Settling on a name gave both of us a way to settle into parenthood before the birth. We could call the infant by name and not simply call him “baby”. This naming of the child prior to birth was something that I had not planned on as we first started talks of parenthood, but when we were getting close, naming him was something that helped my wife and me cope with the pregnancy changes easier.

The third trimester was a breeze, which was nice. I had finished my second year of my MFA and was heading into summer. I started on the house preparations to help fill up the break between the end of the term and the due date. Orion was scheduled to be due on our exact five-year anniversary, which was quite the coincidence. We had so much fun with that idea: having a baby as our anniversary gift for being married five years. I was in full preparation mode while Celcey was finishing her last quarter of teaching. This preparation around the house helped me stay connected, as I was physically doing something.

As a part of my personal psyche, I need to have physical affirmation of my emotions: I bought all the little plastic covers for handles and outlets and cabinet locks for our kitchen. I also strived to keep the house clean as well as safe to show my wife that I’m making an effort to be ready for the baby. This physically doing tasks to show myself is part of who I am, and Celcey loved it because things got done around the house. Unfortunately, I’m also a perfectionist and a procrastinator. I want it done right, and if I have little or no experience in a project, I will take time to consider it—longer than is needed. Celcey had quite the time, being happy I would get things done and frustrated when things weren’t done. I lived on the “honey-do” list when I had free time. She recognized me for my faults and loved me anyway, so she wrote what I need to do and in what order. This was useful not only in my time as a prenatal father but also something that keeps me on track any time before and after the pregnancy with Orion.

As I was preparing myself for the changes of fatherhood and working on home projects, I found that the timing of the birth was not up to us. We had our family participate in a guessing calendar, and this was a fun way to diffuse any tension and make a game out of the last month of pregnancy. Orion was born exactly one week early. The day before his birth, Celcey had completed the full school year without an absence or late, a feat that no other teacher or student had done that year. Afterward, at midnight, Celcey started labor contractions. We timed them to see how far apart they were. We did everything by the book. We didn't want to go into the hospital for Braxton Hicks only to be sent back. After regular contractions that were less than four minutes apart, we decided it was best to go to the hospital. On arrival, contractions were three minutes apart. She was measured and the dilation was at the point where birth could happen any minute. She was admitted, and we were put into the birthing room. The labor went on for hours. Celcey was strong: she lasted nine hours without medication before requesting the epidural. I wouldn't have made it with the pain she endured, and I respect that she could go through this much pain and torment to bring a life into this world. Women risk their lives to become mothers.

I couldn't sleep out of fear of missing something in the birth. My wife needed me, and yet I felt helpless in the room: I wasn't a medical student. I had read a lot about pregnancy and birth but couldn't remember a thing while I was in the room; I tried to do some Lamaze work with her but even that was incomplete at best. Being with Celcey during the labor and delivery was psychologically and emotionally taxing. I wasn't ready for anything. I couldn't recall what to do if something popped up that I had read about or studied in relation to pregnancy. I was trying to remember as best as I could during the lulls where nothing was happening. I couldn't think of anything but waiting to see Orion in person. Labor was intense because of the constant

suspense of expectation, and I can see why many fathers want to help and be there. The suspense is something I enjoy when watching theatre: I love it when things go unexpectedly, and I also love it when things are guessed correctly. It was invigorating, and I never knew whether things would become more or less complicated for my wife and baby.

Orion was a big baby, and with nineteen hours of labor and over three spent actively pushing, it seemed he would never arrive. I couldn't sleep during the labor but would instead watch my wife toss and turn as she tried to deal with the pains. My wife attempted many different birthing positions and found Orion had complications in his heart rate every time she pushed despite the position. We gave him rest and resumed repeatedly without luck. When his heart rate went to a critical level we had to choose whether to do a Cesarean section in case pushing was wrapping the umbilical cord around his neck, or extend the labor risking that his heart rate would drop lower and we could possibly lose him. We ultimately chose to do a C-section delivery out of concern for the safety of the baby. I found myself separated from my wife and then brought in only in the final minute of the C-section, prior to extraction. I felt more helpless in the waiting area there than I had felt the entire nineteen hours prior. While we were separated, they did some prep work in the operating room, and I was left to brood until I could be in the room with Celcey and see the baby. I recognize that during the separation I had the fear of losing my wife or the baby or both. This fear sparked some unease and hopelessness about life with any of those possibilities of loss. I had to shake it before being brought into the room to see my baby's first moments. I was thrilled once I was finally allowed back into the room.

In the operating room, I wanted to stand and see everything, but was told not to do so by the medical staff. I had to wait for the go ahead from the staff to stand, and I was only allowed to take picture and not video. If I could take pictures of my son's first moments, I was fine, I didn't

want to video my wife being cut open like that anyway. Celcey was strong and resilient during this entire process. She had strength, not only for herself but for the pure desire to hear and see our baby. I stayed with her next to her face, as she was masked by an operating curtain from her bra-line down. I could only imagine the skill and precision needed to move all the organs around to extract the baby. I was happy to finally hear the words “you can stand now and take pictures.” Every little thing that I saw was immediately beautiful: the fluids, the reddish color of the skin, his cry, and even the organs the doctors were busy sewing back into my wife. While some of these things are usually things I’d be squeamish about and are messy, in that moment of becoming a father, I could only be in awe of both my wife and baby boy.

It was a quick procedure, and at 7:17 pm on June 10th, 2016 he was born. As we had arrived around 2:30 am, and as Celcey had been up measuring contractions since midnight, it had been a long day, but being a new parent was now a physical, tangible reality. I then felt the boost Bishop mentioned in his text that fathers get when feeling their child after birth. I played a bigger role in the first half hour of Orion’s life than I had expected; because of the C-section I was needed to care for the baby while the doctors finished stitching up my wife. The staff had me follow Orion around as they measured and cleaned him up. I am not the type of guy that feels obligated to cut the umbilical cord, but I followed Orion around and watched until they allowed me to hold him and bring him to my immobile wife for the first time.

Before we left to allow the surgeons to finish stitching up my wife, Celcey was finally able hold the baby she’d been carrying inside her. It was the happiest moment of my life seeing Celcey’s face light up as she held Orion. I realize how corny it sounds, but nothing could replace that moment for me in my life. I would dare to say it was the most defining moment of my life, to share this birthing experience with my wife. She cried, and although I am not one that cries, I

was very emotionally involved. I would argue that fathers who don't cry out of joy for their newborns are not any less joyful than those more emotionally transparent. Being emotionally transparent is something as actors we strive for because emotional transparency is more interesting to watch in a play, but lack of emotional transparency is engrained into many of our societal norms. This lack of transparency was unintended but was also a part of my social upbringing.

Orion was supposed to have skin-to-skin contact with his mother as a newborn right after birth, meaning that he would latch onto the breast and fall asleep prior to being cleaned up and wrapped, but the C-section altered that plan. Celcey only had a moment to hold Orion after he was wrapped and bundled. The doctors and nurses escorted me to another room with Orion while they stitched up my wife. I had not expected this separation; I had supposed we wouldn't be parted once he was born. I could tell this was something Celcey hadn't expected either, as her emotions welled up. She, unlike myself, is very transparent in her emotions. It may have been twenty minutes waiting for Celcey to be brought back to us, but it felt like time had stopped. I was holding my son and I was scared and thrilled because I wasn't supposed to be the one to hold him. I was worried about my wife because the nurses hadn't told me we would be separated at any point once the baby was born. I couldn't decide whether to be happy, worried, or terrified. I held my son for the first hour of his life while they operated on my wife. It was the most precious and fearful part of my existence up to that point. I was alone with him and so nervous. I was now the parent from the classic movies talking to the baby while my partner was in another room after the birth. I had this delicate creature depending on me to calm him as he had just struggled his way into the world. Luckily, he was tired and content to be held and talked to while

we waited. It was nice to talk to him as a being outside of my wife. I never knew I would be depended upon so soon as a father, but it was something I was happy to do.

We finally got into the same room, and Celcey went through the procedures with the breastfeeding consultant to see if our son would latch. He went straight to it and, although he wasn't doing a correct latch, he expressed interest in feeding. It was a tough labor process. Celcey blames the tough labor on the fact that she had an easy pregnancy. She didn't have any extra cravings outside the foods she already ate, she never got morning sickness, her mood swings were not outside the norm for her career difficulties, and she managed to complete the full academic school year as a math teacher with perfect attendance.

The hospital after pregnancy was something I had neglected to consider when studying about babies. We knew that there was a recovery period, and when we felt up to it, we would be able to go home. There were several things that I never considered. The first full day with Orion was exciting: we took turns holding him and watching him sleep in his little plastic box. The next night was a little disconcerting. On June 12th, the Pulse Nightclub Shooting had occurred, killing 49 innocent people and the shooter. This had locked down the Winnie Palmer Hospital until the late afternoon or early evening. I found out about the incident via a text from a friend who had invited us to go to Pulse with him a couple of weeks ago. He was under the impression that the shooting was at the hospital. The Pulse tragedy wasn't something we wanted to recall every time we remembered Orion's birth, but it was a part of where we were and the time of his birth. The emotional investment we were dealing with gave us a desire to go home, and we were told that the healing of Celcey's body was to the point that we could choose whether to go home or stay another night.



We went home and we were excited and nervous about how this would be completely new for us. Orion only woke up a couple of times to feed, and we were happy to be home. The morning after, we took Orion to the pediatrician for his newborn checkup where we found out his temperature was over 100. He was instantly recommended to return to the hospital due to his dehydration levels and fever. We have since then regretted leaving earlier than Orion needed. Instead of being at home, we were now staying at the adjoining Arnold Palmer Hospital for a couple of nights while Orion recovered. The fact that we had to take him back scared us to death. We thought he might be dying. They gave him a catheter, a spinal tap, and an IV drip. I never felt so horrible as a bystander in this struggle. We had no idea why he had a fever. Fearing loss that early in parenting was mentally and emotionally exhausting. I was fearful that if we lost him, Celcey would be different and end up leaving me like the many plays I had read of couples separating after a miscarriage (i.e. *The Good Father*). I had a separation anxiety along with my anxiety of losing my child, and it haunted me. I felt alone, as if Orion surviving was a bridge or a chasm which would dictate our relationship. My wife and I were a strong couple, but I had an overwhelming fear that if Orion passed, we would not be as strong anymore. I understood this might be an irrational fear, but death, much like birth, alters the persons involved.

As the visit progressed, my separation anxiety left and went back to a semi-normal fathering anxiety. I made peace with my demons and found hope in Orion's recovery. He was in a horrible situation, but with test after test coming back normal, he looked increasingly like a survivor. We discovered that Orion wasn't latching correctly, and being readmitted to the hospital allowed Celcey and Orion to get the breastfeeding consultation they needed to breastfeed properly. This was the main issue with his dehydration and, other than that, the rest of the tests came back inconclusive. We were grateful for the extra few days of training to feed

Orion properly but scared by the need to bring him back. I had such a challenging time watching Orion with an IV hooked to him. I felt powerless and didn't really have any sleep during my hospital stay. He was released from care as all the tests they took were clear and we made sure that we were ready to go home. We were relieved finally to be going home again, and this time he stayed home.

Becoming a parent was an arduous task, and despite what anyone may say, the more prepared one thinks one is for parenthood the more one discovers that parenting is an on-the-job type of training. Nothing prepared me as a parent more than the immediacy of needing to care for an infant. It was a time where patience, physical and emotional endurance, and faith (should one subscribe to religion) were tested. There were more trials than victories, more failures than successes, but each day was a day closer to the possibility of getting the next thing right. It is a delicate undertaking to decide to be depended upon by a child, but I'm glad we did it.

As an actor portraying a parent-to be, I must always allow space for the parent-to-be to fail. A prenatal parent is full of flaws, and that should be embraced as a character choice. To portray a "newly discovered prenatal father" on the stage successfully, I need to embrace the character full of anxiety and fear and find the ways the character deals with his anxiety. Becoming a parent is hard and scary but also exciting. The father who doesn't have a little anxiety in the process is either lying to himself or simply incredible. While this prenatal father without anxiety may exist, the incentive to follow the nonexistent emotional journey of such a character is diminished for audience.

As a father of a lovely boy who chats up a storm with his own vocabulary, I have had mixed sentiments about working on this project. Researching something so close to my life while it was happening was both informative and disconcerting. When studying the prenatal anxieties

and depression, I could never shake the feeling of “Am I like this guy I’m reading about and making the same mistakes?” I struggled to maintain hope that objectivity would show itself once the baby was born. Those anxieties and fears grew and changed as I recognized them. At times, I felt the anxieties were imposed upon me by the study, but the journey was full of emotions both positive and negative.

## CHAPTER FOUR: PERFORMANCE ANALYSIS

As I became a father, my focus on the research shifted to how I would balance the continued research and play reading in preparation for the pre-paternal showcase while having a baby to distract me. I went through the first few months of Orion's life reliving the prenatal stages through the writings of playwrights and reflections of the research. The shift toward performance preparation allowed me the time to digest what I went through personally as a prenatal father in relation to the stories I was reading. This new-parent/showcase preparation time was full of sleepless nights, boundless frustrations, and periodic napping. I often ruminate on how much more Celcey must have felt the exhaustion. The sleep deprivation put us on edge at times and we needed to be each other's safeguards whenever we were frustrated with the challenges with which Orion offered us.

In the previous chapters, I have presented the research that I organized in anticipation of an acting showcase. These chapters are full of answers to the rationale behind the pre-paternal emotional life. Researching this topic has been exhausting and thrilling for me. I had found myself frustrated with the number of unanswered questions I came across in the research. When some of the questions from one dataset had answers from another dataset in the project, I accepted the question as answered only to find more possibilities for answers. I was thrilled to put all those answers into my arsenal of possibilities as an actor.

When I first started research, the sociological research had been my base academic data source. The data were circumstantial, and many of the studies were based on a small number of participants. As I continued searching, I found a few books dedicated to fatherhood, and these books contained at least a chapter or two about the pre-paternal life. These chapters led to more chapters from different books thanks to the chain of citations that I followed. After becoming a

father, the scripts written about the emotional life of these pre-paternal men began to make sense. The sociological research touched upon science behind the anxieties of the prenatal man and I could see what the sociological data had in common with my experiences. While there were many unanswered questions to the emotional characterization of prenatal fathers, I assume the ambiguity was because the researchers did not want to generalize these findings to all the pre-paternal men.

Having my son, Orion, as my inspiration, I began working toward the showcase presentation with my experiences during Orion's pregnancy in mind. The project felt metaphorically like a pregnancy: there was the planning stage (brainstorming and selection of material), arranging expenses (renting, purchasing, borrowing), lining up the specialists (lights, sound, director, set design), and baby-proofing the house (settling on a venue and dressing it with set choices). There was pre-show anxiety, show delivery, and post-show depression. While the presentation itself had more audience than a typical labor and delivery, the sweat, the nerves, and leaning on of partners was something that I could see directly relating to pregnancy. As theatre artists, we push toward personal improvement in performance, and in this project, I was supported by my great scene partners and team.

### Devising the Showcase

Typically, I would have cast a showcase and I would have taken the role as director to shape the show and maximize production value for the audience. I decided well before I cast the show that I would not personally direct the show but allow this project to be an actor-based experience as well as something to present an audience. As this project was a showcase of pre-paternal men experiencing their emotional journeys, I had organized the showcase to correspond

to the natural emotions of a prenatal father. It needed to be filled with moments where the scene could be developed and changed without a director present all the time, much like an expectant couple needing to develop together between prenatal visits. This organized chaos was intentional to mimic the need prenatal parents have in leaning upon each other to discover their collective path toward parenthood. I had devised this rehearsal process from the prescriptive parenting books, allowing both partners in the scene the creative freedom in exploring how the characters interacted with each other and what kind of people these characters were outside of the scene.

As the showcase rehearsal was based on pregnancy, I needed there to be a different type of director, one that would give us advice and guidance periodically. This outside eye would check in on the scene pairings and give us advice much in the way prenatal doctors give advice to expectant parents. In selecting a director, I had the fortune of choosing someone I had worked with before at the Orlando Shakespeare Theater, Mark Ferrera. He and I discussed this part-time director role and how he would fit into this type of event. Each scene pairing would work together as a partnership and weekly with the director; as a pairing, we would not take suggestions as an acting criticism but as a collaborative team effort in creating the scene.

I selected several scenes to present in this showcase that presented the emotional experience of a prenatal father in differing ways. Although some of the scenes were not included in performance due to casting limitations, I had considered many scenes due to the way they presented a prenatal father dealing with anxiety. Many of the anxieties were driving forces that propelled the plot and showed how the prenatal fathers handled the stresses of their anxiety. The selection process for the scenes was narrowed down from the forty plays I read that directly presented a prenatal father. There were many options because when the prenatal-father character

is the protagonists or antagonists, the play has more to offer in regard to the emotional life of this man.

Casting partners for this project was exciting because I could see a glimpse of what types of mothers these women auditioning could portray. Along with a monologue, each auditioner was asked to talk about what she feared or loved about pregnancy or the idea of pregnancy. Some were excited, while others were nervous. The realization that women are just as scared about becoming parents as men are was reassuring. My auditioners were always courteous and shared their hopes for a better world. I was surprised by one of the auditioners who told me about the miraculous nature of pregnancy and babies and then said that babies would be better off as imaginary beings than living in this world we were leaving them. Living in the current political upheaval in which we now live, I do not blame her for making this kind of statement. It was an interesting juxtaposition to pair those thoughts together: babies are miraculous but shouldn't be born. The thought of not bringing a child into the world because of the world's corruption was something that I had read in several plays and I had planned to present one of these scenes in the showcase.

My cast was chosen because of the character possibilities I saw in them during the auditions. Lisa had this demure presence that could capture the woman who was hurt by what was said or left undone by the prenatal man. Some of these scenes needed an ally with which the audience could side with and she had this welcoming presence that allowed for that type of character to inhabit her. Lisa was a powerful addition to the show because she never shied away from the difficulty of creating each scene as an individual entity. She had a pessimistic view of the world and current politics but was willing to try to bring hope into this project. In addition to these cast-able traits, the monologue she presented in the audition was from a piece that I had not

read, dealing with prenatal fatherhood. It delightfully surprised me, because I did not expect to hear a monologue that relevant in the auditions. I was pleasantly surprised to find another play that was relevant to my project, as plays were hard to find. I knew there were many other plays dealing with this pre-paternal subject matter and finding the entire theatrical library on prenatal fatherhood would have been impossibly daunting.

The monologue Lisa had auditioned with was from *Lungs* by Duncan MacMillan and did not show up on any database searches. I secured a copy and found it to be an amazing script that took a sidestep from realism. While this was not the only script like this that I had found, *Lungs* was intriguing. MacMillan never named his characters, referring to them solely as M and W, and he had specific requests for the performance of this script: “This play is written to be performed on a bare stage. There is no scenery, no furniture, no props, and no mime. There are no costume changes. Light and sound should not be used to indicate a change in time or place... There is no interval” (22). This minimalistic style is one of my favorite styles of playwriting. I enjoyed the writing and included a scene from the play in the show.

My second cast-mate, Shanel, had a great presence that commanded attention in her audition. While she was largely unprepared for the audition (having no headshot, résumé, prepared monologue, or even personal schedule available), I loved the read she gave with *Expecting Isabel*. She brought out the qualities of characters that were grounded in reality and could balance some of the wacky pre-paternal characters some of the playwrights had written. I had reservations about casting her initially, but her dedication to the project was admirable. She had so many great ideas that we used in our scenes together. The no-nonsense attitude that she brought to her character work in the *Impending Rupture* scene of the showcase had been a great



grounding of the scene and brought out more possibilities to work with than had she been easy going with that character.

After casting a third woman to the list only to find out she had too many conflicts, I assigned the scenes and we met up as a group to do a cast read-through of the scene showcase. Lisa, Shanel, Mark, and I talked about the ensemble-based rehearsal process in regard to how it would work and cleared up any questions about how we would move forward. We began bookwork as a group, discussing enjoyable parts of the scenes as well as precautions and accessibility. Our teamwork mentality was initiated, and we began to have lengthy discussions about each scene that clarified the direction of the project to the group as well as bringing to light some concerns cast members had about the presentation of the showcase.

As the director's role was different, I explained to the group that Mark would be more of a shaper and sculptor of the event. We as couples in scenes were involved heavily in blocking and scene direction choices, which would be explored until we felt it was heading in the right direction. At that point, the director, Mark, would come in and give suggestions and some scene coaching. The role of the director was necessary to shape give guidance to what we had discovered as scene partners. Much like classroom scene study, the scenes were blocked and rehearsed by the actors in the scene. It was individual character-based and malleable. As we made progress in our scenes we would have a regular weekly shaping, in which Mark would massage the ideas that we were putting together for these scenes and add to them. It was a check up on the "scene baby" to see how much progress it was having. Each scene in the showcase was different and had different prenatal anxieties to deal with. We had nine pre-paternal scenes in the showcase that explored different prenatal emotions of pre-paternal men.

### Character Work toward Performance

While the social and dramatic research was extensive, the application of the research is something that was focused and came together piece by piece. This research was an important foundation for me as an actor, along with my firsthand experiences as a prenatal father. I used this research to inform my decisions, and I based much of the work in a way that reflected the vision I had for the showcase. The clinical nature of some of the scenes had to be well devised, and the tenderness of other moments needed to reflect the couples in the play as well as resonate with parents in the audience. The success of the show lay in its ability to create the differing types of circumstances a prenatal father would encounter, depending upon his socio-economic class, his relationship with his partner, and the stage of prenatal parenting in which he found himself.

For every scene, the prenatal father had his own objective coinciding with his play's super-objective, and it did not necessarily coincide with the previous scene's objective or super-objective. As scene partners, we needed to find out what our wants and desires were from each other in the scenes. Sometimes, to find a stronger sense of character motivation, the scenes needed to separate themselves from the show from which they are extracted. Each prenatal father was experiencing differing anxieties and stresses and dealt with the stress in numerous ways within his given circumstances. This project was not about one man's journey but, rather, the journey of several emotional lives. As my research had been wide and expansive, I had discovered that there are not a lot of universal truths for pre-paternal men. Generalities are at times assumed, but each man is individually different while sharing some commonalities. Expecting a child was the only truth that most prenatal fathers shared. With this expanse in mind,

I performed the roles of several different prenatal fathers, using the research and experiences, and find out how each man dealt with his emotional anxieties.

While I had multiple scenes with each partner, the dialogue and the given circumstances changed the relationship from one scene to the next. These pre-paternal men had differing combinations of emotions and anxiety. While some of the differences were easily noted, others needed to be discovered through rehearsal. I identified with the needs of these men as I went through the process myself, but I was in a different social climate and situation and couldn't truly find myself in each of the characters without applying myself to how these characters thought. I used Uta Hagen's nine questions to give me a starting point in discovering the differences. During rehearsals, I was able to work on some Meisner repetition work to find a deeper feeling in the words I heard spoken and also hear how I was perceived, as well as crafting stronger tactics. This foundational character work helped me differentiate a character based on class, relationship, personal history, location, and time, etc. The repetition work used in a few scenes help clarify the "simple" conversations and find depth within the subtextual intentions. I had read several books on anxiety and depression and emotional insecurities men go through in the pre-paternal stages, and I wanted each father to have a distinct set of insecurities or worries. In presenting a showcase of various playwrights' work, I embraced men with varying socio-economic backgrounds and differing fears, along with many other factors that might alter a man's perspective on birth and parenthood.

In laying out my work scene-by-scene, I demonstrate how these men in the plays informed me about the emotional life of a prenatal father. While the research informed the performance, I also learned a lot by inhabiting the character's situational fears. I discovered more personal prenatal anxieties in presenting this showcase, as the lives of these men informed me

differently than living my experience as a pre-paternal man dependent upon my wife's salary. Mostly, these characters were traditional fathers, meaning that the financial burden is expected to lie on the man's shoulders. This difference between my own experience and that of the majority of the scenes made my exploration new, exciting, and scary. Each scene had its own challenges and, with the help of my scene partners, I was able to accept those challenges and embrace the difficulties of the characters respectively.

In my first scene of the showcase, *Knickerbocker*, we explored the prenatal father who was trying to accept his loss of past freedoms as he was becoming a father. This father, Jerry, didn't want to give up his favorite booth at his favorite restaurant. The entire script had him in the booth with different people. In the last scene, the one we presented, Jerry has to struggle with giving up his known life. He needs to allow change to happen and let go of the past joys. While I was working on Jerry, I found his scene to be hard to embrace. He struggled to find common linguistic ground with his scene partners throughout the play. Jerry is clearly disturbed by the lifestyle change that is inevitable with his expected son. He tries to brush off a lot of the characters throughout the play by making jokes about his situation. For the entire play he claims to be ready to become a dad. In reality, Jerry is scared and not ready to become a father. The scene we chose to present was the last scene prior to the birth, where Jerry admits he isn't ready.

As I was playing the character of Jerry, I ruminated about his struggle to talk to his child while he was unborn. I also thought a lot about talking to my child before he was born. I had dismissed it as silly, but I also did speak to him periodically. I did not want to be wrong about my baby not needing me to speak directly to him. I believe that it is the timbre of the voice that is important to the child, rather than direct communication. Jerry had a similar dismissal of speaking to his unborn child that is explored in this scene. As acting partners in this scene, Lisa

and I used some improvisation to find out what we could have been talking about before this scene and how that changed the way we delivered the lines. Some improvisations were unsuccessful as they distracted from the tension needed to further the progression of the scene. While the unsuccessful improvisations were ill-suited for the scene, we found ways to build a relationship that was both playful and sincere. The speaking-to-the-baby moment was hard to find. We took a lot of time trying to find the motivation that would bring the characters the most truth. Jerry embraces the speaking to his unborn child reluctantly at first and, within a few sentences, is committed to this action. Quieting his wife's interruption, he says "I'm not done" (52). He wants to be the type of father that will compromise and learn from his partner's needs. Jerry, to me, feels like a man who needs to be approved by those he loves. His anxiety seems to have a lot of fear of loneliness within it. I found him to be simply sweet natured and discovered that he was scared of the future. While in production the fear wasn't to the level it may have needed, there were many moments in rehearsal where I was scared to the point of tears with how my life was changing as a father.

In the next scene chosen for the showcase, *An Impending Rupture of the Belly*, Clay is struggling with the seemingly simple task of preparing the home for the child. Clay is an upper-middle-class man who sees the world as out to get him due to being attacked in his car a few years prior. Clay has lost his grip on what dangers the society around him may include, arguing that his 9-11 gave him perspective.

CLAY. You think this's about 9-11?

TERRI. Don't call it that.

CLAY. Why not? [...] It was my 9-11.

TERRI. Clay, there is only, and will only ever be, one 9-11. A very big event.

CLAY. Mine was big enough for me. September 11, 2006. (8)

Clay's dysfunctional view of reality has left him fighting a losing fight. I wanted to explore this unreality mindset as something that he feels truly exists. Clay has a post-traumatic stress disorder from his incident several years prior. Clay is trying to prepare his new child for the future, and it isn't pretty. He is a self-proclaimed realist and is grounded in his decision to be prepared for any eventuality that may happen. He is trying to protect his family and will argue his case as a viable reason for his proposed expenditures.

As I worked on Clay, I found his anxiety to be a little schizophrenic. He fears his past and the traumatic event he endured, but he also fears for the life of his child in the future and wants to keep him safe. This distancing from the present left me unbalanced as a person portraying him and I needed to find out what balanced him. I found that he cares about safety and takes extreme measures to ensure the safety of his home. He wants to protect his child from any danger that may come his way. This determination to create a safety net for his family is his life objective. Despite his perceived ridiculous needs to protect the house, those needs are based on what he wants to accomplish and that is where his personal truth becomes easier to grasp. While his wife may not see it, Clay is thinking of their future when he gives her the plans he has put into place to baby-proof the house. These plans and ideas are sincere safety concerns Clay has for his family. There are so many dangers out there that could hurt his family that the outlet covers and cabinet locks will not be enough.

Written unbound from time and space, my next scene, *Lungs*, explored a man who was frustrated sexually with his partner's newfound obsession with pregnancy. He convinced her to have a child initially, but once the baby was arriving he started to doubt his convictions. The scene ultimately chosen from the play went from the inception to the pregnancy test and telling

their parents. While this was a play that jumped from moment to moment without pausing, I wanted to capture that second-guessing nature that he was going through.

In my character development for *Lungs*, I channeled my personal experience of seeing the pregnancy results for the first time. I wasn't quite ecstatic in the way my wife wanted me to be, and that was mirrored in the revelation lines in this scene. This time was a time of uncertainty and excitement. For the character of M, time was largely uncertain. He was a man who worked hard on pleasing his wife, doing things for her to relax and talk together. He says, "I'll see you tonight. I'll run you a bath and we can sit and talk" (56). This character is the type of man who wants to please his wife in everything he does. I explored the opposition of saying one thing but meaning another with him at the point of discovering her pregnancy. This man wants to be there for her prior to knowing for sure that she is pregnant: "I want to see all of it" (59). I found it more impactful for M to want to make sure that she wasn't pregnant, rather than hoping for the pregnancy. The disappointment he feels in the positive results was more palpable as a character choice in that way. After discovering the pregnancy is positive, he didn't want to rush out and tell people they were pregnant because he wasn't sure he wanted to admit the reality of the pregnancy. He uses the statistic for miscarriages to hide his true doubts for parenthood (62). This psychological and emotional investment, in assuring the reality to one's self, was something that I saw in many of the sociological studies, and I wanted to explore that shift with this drama.

I acted with Mark as my scene partner in the next scene, *Crap Dad*, and we had Lisa and Shanel be the outside eyes (directors) during the rehearsal process. This scene was chosen due to its use of parental guidance to assist new parents in accepting parenthood. This scene explored a man whose father was primarily absent from his life choosing to prevent his son from making the same mistakes. The play explored the perspective of mortality that hits a man when he becomes

a father. Suddenly, he sees the inevitability of his own death with the new life. The prenatal father sees what he may have considered as erroneous parenting in his mother or father and finds himself more forgiving of those mistakes. I had certainly thought more about my parents after finding out that we were expecting. I recognized their parenting faults as something on which they were working at the time. Parents do not know everything immediately upon becoming parents; it takes time for each parent to learn, and often that comes with learning via mistakes. I respect my parents for the work they put into my learning and care more now than I did three years ago. In *Crap Dad*, Paul is trying to overcome his regrets about leaving his partner before he sees his kids for the first time. Paul had a sort of fabrication-mentality toward the children existing. He does not want to see them because he is afraid they won't like him in the same way he hated his own father for not being there for him. This role reversal leads him to believe that maybe it would be better if they never see him at all. Paul's father comes to see him, having found out that he is a grandfather. While he cannot admit it, he wants Paul to be a better father than he was. This grandfather wants to have a second chance at seeing his offspring grow. Paul is brutally open with his father in a way he hasn't been in the past. He is mean until it is revealed that he is scared of being a horrible father. "It's not easy being a dad is it?" (52). This opening up is a big step for the relationship between these two men. Mark's character has transformed from the neglectful father to the inquisitive grandfather wanting to see his grandkids. There was a regretful quality to Mark's delivery that made me bring out Paul's hope in his paternal anxiety. We chose to keep the London dialect to enhance the audience's perception of class. Working-class London men are often portrayed as silly and crass, but Paul was regretful, and I didn't shy away from that perception I had in presenting him.



I selected *The Good Father* to use because of the fear of loss that I experienced during the labor process and as a new father shortly after Orion was born. This is laid out in a way that presents a man who was diagnosed infertile but discovers that he has become an expectant father. The audience is taken with this man, Tim, and allowed to experience his joys and struggles toward parenthood. He even goes to the point of putting his dog down to keep the baby safe. The scene selected was after a late-term miscarriage where the couple needs to find closure. Since the script is full of Irish colloquialisms we kept the dialect in the portrayal of these characters. While the scene for the showcase was intended to be longer, including the revelation of the child not being his, we shortened it as a group to encompass simply the loss and how the two of them dealt with each other after the miscarriage. While these two types of fathers are both viable options in presentation, we wanted to present the father who experienced the loss of his biological offspring.

This was a hard scene for me to inhabit because of how much fear I went through as labor and delivery dropped Orion's heart rate to a critical level. This fear was exacerbated by the fact that the day after we were released from the hospital, Orion was rushed back to pediatric intensive care to determine the cause and care for his unusually high fever and dehydration levels. As I watched my newborn son being hooked up to an IV, having a spinal tap, and a catheter, the fear of losing him became something I was forced to handle. When his heart rate plummeted prior to our decision toward Cesarean-section, I was comforted by the fact that we had options, but in our readmittance, I was lost and depressed. This was hard for me to cope with as I needed to be stronger than I was for my wife. In presenting Tim, I found the substitutions to be easily accessed and, while Orion had survived, the fear of losing him connected me to this character's emotional strife. As I worked on his hope for the future, I had to allow the actuality

of loss to be present in every sentence. Tim was afraid of losing Jane as well as his son, just like I was sure that I might lose both my wife and Orion if we had had a labor miscarriage or infant death.

While I had felt my fear needed to be hidden from my wife, Tim needed to find some transparency and open up the wounds and expose his anxieties. Tim had both his fear and love to motivate him in his endeavor to have a family. He needs to be the father of his child even after the baby dies; it keeps him whole. Jane's attempt to run him off and free him from the burden of his dead child is contrary to his plans. While rehearsing I struggled to balance anger, fear, depression, and hope in the scene. We worked and reworked this scene more than other scenes due to its emotional connection to my own experiences. It was a difficult journey, allowing Tim to live this loss while I escaped my loss and have Orion. I kept Orion's near-loss and my fears of being alone close to my heart while performing Tim.

The next scene, *Holly Down in Heaven*, was something lighter for the audience. This scene is full of comedy and lighthearted conversation. Yager is a young man who is naïve and fickle, trying to see his girlfriend who is locked up at home after they were caught together. He is the type of guy that is impulsive and does what he thinks will get him the most gratification in the moment. While I am not the age of Yager in *Holly Down in Heaven* and initially found him to be shallow, I wanted to use his character to present this young man as someone who was trying to grow up. He is a dull person that thinks his pregnant girlfriend, Holly, has simply gained weight and should exercise more. This blatant choice would leave him uneventful and would not serve me in exploring his emotional life. The more I read this play, I loved his interruptions into the scenes. He is trying so hard to be there for Holly. He is loyal to her, even though he is unaware of her changing with pregnancy. When he does find out about the baby, he

is curious about what that means for his relationship with Holly. I explored what made him tick and kept seeing his loyalty of returning to Holly time after time. He was not allowing others to tell him when he could see her. He wanted to be there as a dad. He does not know how to be a dad, but he has held a child once. This scene was played with the awe that pre-paternal teens have with the idea of fatherhood, thinking that everything will be easy. I admit that even I had no idea how hard parenting is on a daily basis. This reflection of my own misjudgments on the struggles of parenthood was put that to use in Yager's character development. He can do anything he puts his mind to and during this scene he wants to prove Holly wrong about his ability to become a dad.

*Ashes* had been a struggle for me to put together for the showcase. This script follows a couple working on becoming parents. Both partners have nothing wrong with their procreative functions, but for some reason, their reproductive systems (eggs and sperm) are not compatible with each other. I wasn't in love with the character of Colin, but I felt he was someone who presented the procreation anxiety struggling toward fatherhood in a unique way. His dialogue was unfocused and strayed off topic too frequently. This had me reevaluate the play's involvement in the show. I did, however, enjoy the scene with the doctor and nurse giving Colin advice for increased sperm production. I felt that Colin was straying off topic because the subject of parenthood was hard for him, so I took out his quirky stories and allowed him to listen to the doctor's advice. Many men have trouble with insemination, and I felt this inclusion was something that brought the severity of Colin's situation to light. I wanted Colin to feel bombarded by information and decided to add layering of another doctor's advice from a different play, *Subfertile*. Both plays deal with men struggling with insemination and going to extreme lengths in their journey toward hopeful fatherhood. This scene was presented to Colin as

a diagnostic conglomeration of insemination advice. I used Colin's anxious confusion from *Ashes* trying to understand what is expected of him and let him listen to both doctors give him advice that overwhelmed his conscious thought process. I rehearsed this scene as a repeat exercise. I listened to what was said and repeated the words that I could hear. I was lost in trying to keep up with both doctors' lines. This frustration and sense of being lost were part of the emotional journey Colin was experiencing. With the rehearsals that we had for that scene, I was happy to allow the readers their lines as much of the advice had similar advice as well as contradictory advice. It was about the impact the words had as Colin tried to understand his next steps.

The diagnostic scene was a good lead into my next scene from *Subfertile*, where I could explore the need to release frustrations. We decided to use the medium of a video game to give Tom an escape from the pregnancy tests. Throughout the play, Tom is frustrated about how he cannot have a biological child. He spends exorbitant amounts of time and money to remedy his condition. Some of his friends and relations give him advice on how to remedy impotence and he is slowly losing his calm demeanor. He is infertile but not impotent. While Tom is dealing with this frustration, he also has anxiety over his inability to carry on his family name. His family has a tradition of passing along the name in a unique way: alternating first and last names. While Tom hates this tradition, he feels the failure he has in producing the desired offspring that wouldn't share this tradition. He wants to have a girl so that he will not feel guilty about having a different name for her.

I chose this scene because it shows a man who allows his anxieties to burst out in hurtful ways. I am, by nature, a peacemaker and will do anything to ensure the happiness of others. This scene was challenging me to say selfish and mean things to my partner. There were times when I

wanted to cut the lines because they hurt to express. It was contrary to how I would have handled the situation. This struggle was explored in depth through many rehearsals and blocking changes. We wanted to have a fire in the scene that allowed for the couple to stay together but stepped over the line of comfort. These characters are in a loving relationship, but the things said in this scene are vindictive and crass. I toyed with many objectives in the process of discovering what he wanted from Jackie. The objective that drove the hardest was Tom's desire for Jackie to stop talking about having a baby. He was the infertile party and couldn't take the pressure any longer and needed her to stop bringing up his failures to reproduce. Tom changes from the protagonist in the play to the antagonist with this scene.

*Expecting Isabel* is a lovely script about a couple experiencing infertility, but the scene I chose was prior to this discovery. I wanted to show a man who is positively seeking pregnancy to counter my previous scene where he wanted nothing to do with pregnancy. I explored the character of Nick during rehearsals and found him to be a hopeful father that sees the good in all the things around him. Exploring this type of man, I needed to discover his depth. I didn't want him to be a surface-level character due to his optimism. He is trying to give up his life's pleasures to have a child. He wants something bigger than himself. He seems to want to be the perfect father and husband without expectations in return. I decided that he wants his wife to be happy, and despite everything he does, Miranda is still pessimistic about their life. Nick sees her unhappiness as a personal failure. He is a dreamer and is always looking for the positive, but he wants her to be a part of his dreams. Nick wants to bring a "soul into the world" (10). Nick's hopeful mentality and attitude is something my wife sees in me.

### Post Production Thoughts

In this project, I found that collaboration was crucial to a successful showcase event. My cast and crew were invested in the showcase and the success of the project. They helped me find stronger tactics and objectives in my scene work. I learned how to create avenues of trust as an actor and true collaborative work as an organizer by working on this project. Many of the great ideas were given by my scene partners, such as playing the video game at the beginning of *Subfertile*, which was not part of the script. The give and take I experienced in my rehearsals, having given equal control to my scene partners, were beneficial because without their input I would not have found the emotional truth of many of these characters. While the show was shaped by a director, the collaborative aspect was something I could see myself using in future endeavors. Some of the unrequired rehearsal time prior to rehearsal scene work could be used to find a connection with my scene partners. I could use the give and take I experienced with the project to find the emotional life of my characters. I feel that I, as a future educator or director, could apply some of this style of rehearsal work within the process for deepening the relationship within the scene and further the exploration for emotional truth.

A struggle I had in the process was ensuring that the audience would follow the characters I was portraying and see them as separate distinct individuals. I had to make sure this was a showcase of prenatal *men* and not a singular *man*. This distinction was part of the reason I chose the order in which the scenes were presented. I didn't want a cast-mate actress in back-to-back scenes and I needed to make these characters have differing emotional back-stories. In switching between characters, I had to have an internal line or two to create the moment before. These scene changes were quick, and I had to let a scene end and allow the new scene to take over. As an actor, this schizophrenia in character work was something I had to rehearse in order

to help keep the changes as honest to the character as possible. Each character had anxieties and quirks that made him unique. I had to focus on the stark differences between characters before allowing myself to meld into the characters' wants and desires. This was facilitated by small costume changes that gave me a quick second to finish one character and move to the next. I wanted to ensure the audience knew each character was different. There are so many men to present in this study but these nine characters in the showcase needed enough variety to help the audience see the few diverse types of prenatal fathers presented in the theatre.

This production has been of immense value to me as a performer and an actor. Working with a rehearsal process modeled after pregnancy and delivery has given me insight as an actor into how each show is like a child waiting to be brought to life. This rehearsal process awakened a creative cooperative side to my work in a way that I included partnered character discussions with later projects. Working with my partner off stage in between working with the director helped me keep show focus at Orlando Shakespeare Theater and gave me a deeper sense of emotional vulnerability. It was extremely helpful to use in understudy work, as I need to find the intention and blocking of the person in the role but needed to find the emotional truth in myself. Maximizing my rehearsal process, either on my own or with scene partners, helped me discover a side of my acting work that was experimental and full of creative freedom. These qualities were unrecognized in my work prior to the showcase.

I've realized that there is a lot more that I can bring to the table as an actor in rehearsals. I was always amazed at the ability my scene partners had in utilizing our rehearsal time to further the scene work. The freedom that my partners found in a collaborative-creation environment helped me discover that I could express myself more openly. Over the years, I have discovered

my fear of success in my process toward becoming a stronger actor and performer. This fear is unnecessary but has deep roots within my psyche. I need to allow that fear to have its moment and kindly ask that fear to leave during my rehearsals. I have valid choices and opinions that have been stifled by my self-doubt. By fully embracing a character/objective/tactic choice in my acting, I can find the confidence that I have been lacking and bring more to my performances. I love acting because of the thrill of being live on stage. There is an anxiety to it akin to the anxiety a prenatal father has in his journey toward parenthood, similar to, say, a fear of heights paired with a love of skydiving. The fear of success through failure is something I need to embrace as a performer. By allowing a choice to be a fully committed failure, I can see how that can lead me to stronger and more pertinent choices. Sometimes a perceived wrong choice serves the movement of the scene in a stronger way. I learned from my partners that much of what I succeeded at was due to monumental failures in the character building process. My scene partners were honest and allowed me to learn through the rehearsal process with them. There was a lot to learn from my scene partners and I feel that as an actor I am more aware of my role as scene collaborator because of this project.



## CONCLUSION

This project was influential to me in an immense way because of the fact that I was working on this project during the time of my own prenatal fatherhood transition and for several months after becoming a father. Enormous life changes like mine removed the concept of much objectivity for any actor. It was impossible for me to separate my experiences from my research due to constant comparisons. These life changes required my focused effort in order to allow contradictory experiences to be a part of my pre-paternal character-building research and process. I also was opened to some possibilities that I had not considered and experienced as a prenatal father, and those differences were a constant reminder of how different I was as I experienced these emotional pre-paternal changes. Had I done this type of project several years from now, my perspective would be a lot clearer and I would not feel like I were imposing my life onto the stage. While this project was difficult because it was not long after my personal prenatal experiences had occurred, it was a major step in recognizing possibilities for utilizing my past and using my self-reflection for theatrical purposes.

Discovering the emotional journeys prenatal men have during their transition to parenthood has been an extraordinarily informative task. I was able to find many possibilities for the types of emotional stress within dramatic texts, as well as finding scientific reasoning behind why those anxieties exist. The complexity of the individual prenatal father is built upon his physical and emotional environment. The influences on the physical environment include financial stability, diet, health, relationship, and weather. Influences on the emotional environment include the physical environment as well as social pressures and expectations given by peers, family, religious leaders, political affiliations, and personal aspirations. The diversity of which a prenatal father's emotional life consists is not something that can be generalized. The

discovery of the details helps the actor find his truth in portrayal. With the research, I have found several possible avenues to help an actor in presenting this type of character. With each scene that I presented in the showcase, I discovered distinct aspects of my research had helped. Granting that each character had his own differences, the fundamental knowledge of the sociological research about pre-paternal anxieties and emotions was invaluable in presenting this range of pre-paternal fathers. With rehearsal, I was able to give each character his own avenues toward becoming a parent.

I was surprised to find out about the chemical changes a man experiences. Inner turmoil can also be chemically based and thereby irrational by most social standards. Those chemical data were unexpected for me as I assumed the changes a man experienced were all emotionally based and had nothing to do with the body's own chemistry. As I look back at that assumption, I realize that *emotions also have an effect on the chemistry within the body*. While I may have had some idea that emotions are chemically charged and regulated, I did not connect that until reading about the estrogen, cortisol, and testosterone changes in Kim and Swain's "Sad Dads" (42-43). While this change in chemistry has intrigued me, the fact that emotions can affect the internal chemistry of a person should be something well considered in my theatrical pursuits. When a role is emotionally taxing it may result in slight but noteworthy chemical changes within an actor's body.

Further, I was astonished by the lack of theatrical studies on pre-paternal men. While I recognize that scholars of drama are not able to address all aspects of theatre fully, the complete absence of any studies dealing with the subject matter of prenatal fatherhood is a surprise. This is especially fascinating when we compare this absence with the positive wealth of infertility plays I came across in researching parental preparation in theatrical texts. I assumed there would be a

few, but these plays were easier to locate due to the upfront nature of play descriptions. Many times, play descriptions themselves prevented me from finding pre-paternal plays easily. If plays had more search criteria available, I would have found many more plays and the research would have had more evidence of the pre-paternal emotions within dramatic scripts. I'm still curious about how this problem may be remedied, as the entire theatrical library of plays is consistently growing. While the influx of new plays and playwrights comes into the library, I would hope they are including more keywords for finding particular kinds of characters. Furthering this research into pre-paternal characters in theatre would allow the actors portraying them better avenues toward performance.

I find the topic of prenatal fatherhood still to have a lot more mystery to it because it affects each man differently. In my own circle of new parent friends, I have seen several differences in how each man approached his pre-paternal time. The emotional approach and recognition during the pre-paternal time affected the way they treated their partners and how they eventually accepted the new infants into their lives. There are vast differences in every situation, but each man was working toward becoming a parent in his own way. Each man is evolving into his own parenthood and, as Greg Bishop states in his book, "Paternal care is an evolved behavior in us men" (3). I know that my evolution toward parenthood was unique in the fact that I was also studying the topic for academic purposes. This allowed me to have more knowledge than I would have gained had I not used this personal experience to shape my research.

Theatre is an emotionally charged field of artistic practice and, likewise, prenatal parenthood is emotionally charged. I had many instances where I was acting like I knew what I was doing in order to help my wife during her pregnancy, and many times I was completely wrong. Failing as a prenatal, or even postnatal, parent is a part of the learning curve. Becoming a

parent is a journey that has many obstacles and challenges. There are aspects of this journey that are expressed in the theatrical texts beyond the words of the script. These ideas presented in prenatal dramatic literature give the reader a sense of living with a set of literary characters that have conflicting wants and desires. I am now a father, and no matter the anxiety and worry I may experience, it is a small part of my fathering experience. I have shared some of the events that I went through in my prenatal period. No matter the preparation a person can put into becoming a parent, there is no amount of preparation sufficient for this new adventure. The experience of having my own child was something that changed the way I felt about life and children.

I was startled to find myself connecting to arguments about prenatal anxiety. I suppose this connection is mostly out of the fear that I might be anxious, an unnecessary anxiety brought on by myself, which seems to be a common theme for newly expectant fathers. Having survived the prenatal period, which is no real feat of accomplishment in comparison to my wife, I see the overreactions I went through trying to do things to prepare myself for fatherhood. Whether or not it was prenatal depression, I do not know, because I, like many men, am too proud to admit when I need help. This thesis has been about a journey toward both a showcase and my personal journey as a father-to-be. As such I have been able to utilize my time as a scholar in duality with my personal growth as a societal contributor. I put together scenes from theatrical works exploring pre-paternity directly, utilizing the research collected from the compiled datasets on prenatal fathers.

As I have completed my scene showcase/performance, I have been contemplating how this event gave me the desire to act or direct full mounting of these productions. I am still interested in exploring my own pre-paternal emotions and finding deeper meanings within those

emotions. As an actor, I know my emotional journey into this type of character will only enhance and add to the experiences I lived through first-hand as a prenatal father. The emotional life behind these characters going through this substantial perspective change has been a profound influence on my ability to identify with a text. These shows have been insightful as to how fathers in differing situations try to cope with the subject matter at hand. As I prepared for fatherhood and discovered my path toward dramatic scholarship, I found myself full of enthusiasm to find more dramatic scripts to read dealing with this topic of prenatal fatherhood. I had certainly found several, but there are several more to be discovered and added to my list and library of prenatal fatherhood scripts.

In creating my personal pre-paternal narrative, I see that the struggle that was most difficult for me at the time was my own opposition to change. While unreasonable and commonplace, it is generally common for a prenatal father to desire stability in his life and thereby try to maintain his old life in any way that he can. My wife and I, as prenatal parents, had fights over trivial things which we eventually worked out. We made sure that we knew that this was stressful for both of us and never dwelt upon the arguments. I had to make changes in my perception of personal space; giving up time and physical home space in preparation for someone who wasn't there yet was a challenge. Theatre is a space where actors' personal boundaries are explored frequently, and this exploration was an enjoyable time for me to inhabit other situations and experiences. The emotional extraction and exploration that we do as actors is part of what I love most about theatre, but allowing myself to open up for a child I had not seen physically was an arduous task for me to accept and overcome. The fact that I was reluctant to emotionally open up for the pregnancy for a long time was eye-opening. I struggled to be emotionally involved in the pregnancy stage of our prenatal parenthood. I wanted to mask or

hide my emotions, but theatre doesn't let prenatal fathers hide from the audience: the audience knows when the characters are manipulating the facts to get what they want. Audiences crave conflict and resolution, which is not always a key part of every script. At times, a script will be left unresolved and may be upset some guests, but as long as the conflict is charged between the characters, the audience may watch and enjoy plays that don't fully resolve.

I was surprised by the many fatherhood support sites I found online. This growing online presence of support sites for prenatal fathers is full of specialized material that is, at times, circumstantial and without scientific support but is, nevertheless, a document of some fathers' experiences and bits of advice that are worth considering. As unsupported data, these sites can seem irrelevant, but as an option for presentation, they are beneficial to explore as possibilities in character creation.

I have found this process to be frustrating due to my continual need to find the positives in my own prenatal journey and yet accept the negative from the potential fathers in studies and plays. This separation between my own life experiences and those presented was something I had to enforce objectivity upon. The project was an event that was close to the time that I became a father and therefore difficult to truly be objective. I believe that I would not have had the amount of difficulty presenting these characters had I not been a new father. The newness of the life as a father is something that I am continually evolving into, and I feel that I presented the project with a fervor that was raw and unbalanced. The unbalanced moments in presenting the pre-paternal scenes have given me several clues into how I felt about my own experiences. I present this study as my experience in research as an artist and a father in the hope that my work may help another artist or prenatal father see something useful within its contents.

**APPENDIX:**

**LIST OF PLAYS WITH PRE-PATERNAL MEN**

This appendix includes the list of the forty plays that was read in preparation for this thesis. Each play in this list contains a pre-paternal character. This list includes: title, author(s) and the year of the first production of the plays read during the research.

*The Agreement* by Douglas Taylor (1967)

*All This Intimacy* by Rajiv Joseph (2006)

*Ashes* by David Rudkin (1974)

*At First Sight* by Annie Pie (1998)

*Bartholomew Fair* by Ben Jonson (1631)

*The Big Funk* by John Patrick Shanley (1990)

*Baby* by Sybille Pearson, David Shire, Richard Maltby, and Susan Yankowitz (1983)

*Bed and Sofa* by Polly Pen and Laurence Klavan (1996)

*Baby with the Bathwater* by Christopher Durang (1983)

*Birth and After Birth* by Tina Howe (1995)

*The Cortez Method* by Rob Keefe (2014)

*Crap Dad* by Mark Catley (2004)

*Christmas on Mars* by Harry Kondoleon (1982)

*Cabaret* by John Kander, Fred Ebb, and Joe Masteroff (1966)

*Chicago* by John Kander and Fred Ebb (1975)

*Don't Hug Me, I'm Pregnant* by Phil and Paul Olson (2011)

*Desperate Affection* by Bruce Graham (1994)

*Expecting Isabel* by Lisa Loomer (1998)

*Fully Committed* by Becky Mode (1995)



*The Good Father* by Christian O'Reilly (2002)

*Grounded* by George Brant (2014)

*Holly Down in Heaven* by Kara Lee Corthron (2012)

*I am a Camera* by John Van Druten (1951)

*An Impending Rupture of the Belly* by Matt Pelfrey (2007)

*Into the Woods* by Stephen Sondheim and James Lapine (1986)

*Knickerbocker* by Jonathan Marc Sherman (2011)

*Lungs* by Duncan MacMillan (2011)

*Love's Labour's Lost* by William Shakespeare (1588)

*Little Footsteps* by Ted Tally (1986)

*Life Expectancies* by Michael Kearns (2006)

*Manning Up* by Sean Christopher Lewis (2016)

*Noise* by Alex Jones (1997)

*Pericles* by William Shakespeare (1608)

*Radiant Vermin* by Philip Ridley (2015)

*Spring's Awakening* by Frank Wedekind (1891)

*Spring Awakening Musical* by Steven Sater, Duncan Sheik, and Frank Wedekind (1999)

*Subfertile* by Tom Mardirosian (1990)

*Tuesdays & Sundays* by Daniel Arnold and Medina Hahn (2000)

*Word Becomes Flesh* by Marc Bamuthi Joseph (2003)

*The Winter's Tale* by William Shakespeare (1610)

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