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The Open University

The Making of Modern Motherhood

Memories, Representations, Practices



Welcome

WELCOME

Fertility is all the rage, and the pregnant body is taking centre stage. Pregnancy in contemporary times is no longer marked by a period of confinement – the very term sounds obscenely old fashioned – the relic of a bygone era when reproduction was a private affair, constrained and hidden from view. In the new-fertile-world-order the pregnant body is everywhere and motherhood is never far from the headlines. It starts with the BUMP. The swollen tummy of pregnancy once veiled in voluminous amounts of material, Laura Ashley dresses, polka dot maternity smocks and out-size T-shirts producing a perverse dialogue with the body: 'I know you've had sex at least once and, for that, the next nine months must be spent looking as deeply unsexy as possible'. The latest look, the new fashion accessory, is the bump itself. Emphasise it, contour it, show it off. Skin tight T-shirts and low cut jeans reveal the bump in all its gorgeousness. Fecundity has never been more fashionably visible.

But the mooning tummy of pregnancy is more than a stylish display of mellow fruitfulness. Pregnancy leads to birth and birth leads to parenting just as it did for our mothers, grandmothers and great-grandmothers before them. So apart from the bump-on-show what else has changed for women becoming mothers for the first time? The Making of Modern Motherhood (MoMM) is a research project that explores this very question. Based on a three year study with intergenerational chains of women in the same family, daughters, mothers and grandmothers, this exciting and timely project documents the ways in which women negotiate mothering identities over generations and time. Becoming a mother has always been a profound moment of personal change which ties us into the past,

the future and to each other. Yet what it means to be a mother is changing and fragmenting in line with women's increased participation in work and education. The study is part of a wider project to document and understand the shifts in women's lives that have taken place over the twentieth century and the implications of these for social theory. The study aims to create a new policy language around mothering which recognises the significance of divisions between women as well as the continued commonalities arising from experiences of reproduction and care.

The Making of Modern Motherhood project was funded by the Economic and Social Research Council¹ as part of its Identities and Social Action programme www.identities.org.uk. The study has benefited from advice and support from the Family and Parenting Institute. The research project has been based at the Open University and directed by Professor Rachel Thomson (Faculty of Health and Social Care) and Dr Mary Jane Kehily (Faculty of Education and Language Studies). The research team also includes Lucy Hadfield and Sue Sharpe. A further stage of the study, also funded by the Economic and Social Research Council forms part of the Timescapes initiative www.timescapes.leeds.ac.uk.

This report is divided into three main sections: an introduction providing background to the study and detailing the methodology used; a section reporting the main findings of the study in relation to the original research questions; and a final section showcasing the voices of the research participants, organized in terms of key policy and practice relevant areas – work, birth and change. Images used in the report were generated during the study and are documents of women's preparations for the arrival of their first child.



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Introduction

The increasing participation of women in further and higher education and the labour force since the Second World War has transformed the shape and meaning of women's biographies (Lewis 1992), reflected in a trend towards later motherhood. Yet stagnation in social mobility and widening inequality has also heightened differences between women, reflected in differential patterns of family formation depending on educational and employment status (Crompton 2006). The transition to motherhood is not only an important site of identity change for women but also an arena where socio-economic differences between women are defined and compounded through the creation of distinct cultures of child-rearing (Byrne 2006, Tyler 2008, Clarke 2004).

The Making of Modern Motherhood project builds on existing qualitative investigations of the process of becoming a mother (Bailey 1999, Miller 2005), and negotiations of changing opportunities and circumstances over generations (Brannen et al. 2004, Bjerrum Nielsen and Rudberg 1994, 2000). Bringing together longitudinal and intergenerational research design with an analysis of popular culture, the study explores how contemporary motherhood is a site of solidarity and division between women. Following from our previous work on the relationship between social location and biographical trajectory among a generation of young people (Henderson et al. 2007), we explore how the project of motherhood can be understood as an expression of social location - arrival and departure points within journeys of social mobility. This is an empirical project with the potential to speak back to dominant late modern theories which suggest a whole scale shift from biographies shaped by tradition to those shaped by choice (Beck 1992, Kehily forthcoming). By focusing on the transition to first time motherhood,

we are able to contextualize and compare accounts of pregnancy and birth within and between generations. The approach captures the interplay of historical, generational and biographical processes, connecting the subjective intensity of motherhood with the remaking of inequality and privilege (Smart 2007).

Inspired by the phenomenological approach of de Beauvoir (1949) we have conceptualized pregnancy as a bodily *situation*, that is itself situated in terms of the particularities of lived experience (subjectivity), social arrangements and the norms and discourses that constitute the 'myths of femininity' (Moi 1999:80). The bodily situation of women's experience varies considerably. For some, reproduction is a struggle that demands the support and intervention of others in the form of infertility treatment, assisted conception, adoption and surrogacy. For others the body is taken for granted: a source of pride and wonder or an imposition to be eliminated or accommodated. The subjective experience of pregnancy and birth are dependent on the personal and economic circumstances of expectant mothers, their positions within families and the intergenerational legacies that come into play as maternal subjectivities are formed. Bodily situations combine with subjectivity to locate women differently in relation to norms and discourses of the 'mothering advice industry', maternity services and local mothering cultures. The coincidence of these three dimensions constitute the situation of mothering, which is itself articulated in and through time. This framework extends the pioneering work of Bjerrum Nielsen and Rudberg (1994) who point to the way 'gender projects' are the result of the coincidence of self-conscious gender identities, subconscious subjectivities and the material and social possibilities of the moment.



The concept of the *situation* enables us to capture the very different ways in which women of the same generation encounter motherhood, an approach suited to the diverse composition of contemporary British society, and the potential of new reproductive technologies

The aims of the study were to:

- ▶ Generate a unique layered data set capturing how women negotiate the identity and experience of motherhood over generations and time.
- ▶ Contribute to ongoing dialogue between late modern and feminist theory, focusing on the part played by women's lives in wider processes of detraditionalisation.
- ▶ Build on and extend an emergent body of intergenerational research, combining longitudinal dimensions and the analysis of cultural resources and texts.
- ▶ To address the compelling policy question of whether motherhood is becoming a new site of social division, and/or a site of renewed solidarity.

Methods

Questionnaire

A pre-selection questionnaire was developed, piloted, refined and distributed through settings in a new town and inner city research sites including: Mothercare shops; public and private antenatal classes; Sure Start; Young Mothers projects and specialist networks aimed at disabled and lesbian mothers. The primary aim of the questionnaire was to assist us in identifying a diverse interview sample of expectant first time mothers. In addition to demographic data and a basic reproductive history, we also collected information concerning the respondents' mother, preferred sources of advice, media consumption, antenatal activity, birth plans and feelings about pregnancy. In total 144 questionnaires were completed. Questionnaire data was coded and inputted into SPSS and basic descriptive statistics were run on an initial sample of 131. The resulting

report guided our analysis of media texts and informed our selection of interviewees. We gratefully acknowledge the help and support of key people in our research sites including Elizabeth Day at Mothercare, Kath Hunter at Milton Keynes General NHS Trust and the mothers, grandmothers, friends and partners who took part.

Interviews

From the volunteers we identified a sample of 62 expectant mothers for interview. Volunteers were followed up fulfilling the requirements of a quota sample constructed primarily in relation to age, but providing diversity in terms of social class, ethnicity, work status, living situation and proximity to family support. An interview schedule seeking to capture biographical narratives was generated, piloted and refined. An initial invitation to respondents to tell the stories of their life and pregnancy was followed by a discussion of the resources that they drew on in preparing themselves for motherhood. Visual prompts were used to facilitate an exploration of sensitive issues including sexual relations, body image, breast feeding, and dis-identifications with other mothers on the basis of social class, age, ethnicity and disability. The final section of the interview involved discussion of the respondents' expectations of motherhood and their birth plans. Interviewees were also asked about preparations for the arrival of the baby, and, with their consent, photographs were taken to record these.

Consents for recording and archiving were negotiated before and after the interview which was generally conducted in women's homes and recorded digitally. A coding frame was generated through an analysis of a subsample of interviews, and an agreed approach was established before the full sample was coded using NVivo. After the interview, detailed field notes were made documenting access, setting, appearances, emotional dynamics and emergent themes. Our approach was guided by ethnographic note taking and the use of case profiles in qualitative longitudinal research (Thomson and Holland 2003). Researcher subjectivity was recognised as a means for enhancing meaning (Lucey et al. 2003) and field notes were shared and interrogated at research team meetings and analysis events.



METHODS

Case studies

Twelve women were invited to take part in case studies. In making our selection we sought a diverse sample as well as considering the resilience and enthusiasm of potential participants. Case studies included interviews with grandmothers, great-grandmothers and 'significant others', and were completed with a second interview with the expectant mother at least 1 year after birth. Interview schedules were generated through a combination of standard questions and themes identified from the expectant mother interviews. Grandmothers were asked to recall what they knew of their own mother's experiences of pregnancy and birth before providing a detailed account of their own first pregnancy and commenting on their daughter's experiences. They were also asked to share images and objects from their own mothering and photographic records were made with their consent. Multidisciplinary analysis workshops were enormously productive in helping us create a common framework for the analysis and representation of case study data. These case profiles operate as a data management tool for a complex and mixed media data set and as a vehicle for narrating and interpreting the whole case.

Cultural analysis

An analysis of popular representations of contemporary mothering was undertaken in parallel with the interview study. Popular resources were identified in the questionnaire and integrated into the interview schedule. We also carried out a focused analysis of magazines aimed at new mothers during the period Sept 2004-April 2006.



Findings



Here we consider our emergent findings in relation to our original research questions, demonstrating how our different forms of data provide us with distinct insights.

What does motherhood mean to first time mothers? Are there differences between women relating to age, social class, ethnicity and sexuality?

Our initial sample of 62 women ranged in age from 15-48. Pregnancies were planned and unplanned, wanted and unwanted, technologically mediated and 'natural'; and variously narrated as mistakes, surprises, decisions and gifts. While each of these 62 'situations' is unique, together they reflect 'a historical sedimentation of our way of living in the world, and of the world's way of living with us' (Moi 1999: 68). The social circumstances that structured women's options as well as the cultural resources that they drew on in order to imagine motherhood can be understood as part of a common culture (Willis et al. 1990) that women put to different use. Ethnicity, sexuality and disability were important factors in shaping the situation of mothering, as was relationship status, locality and the proximity of family networks. Here we draw attention to the intersection of social class and age in the constitution of motherhood as a biographical event.

Whatever their age, women tended to talk about an imagined sense of themselves as mothers, formed in middle childhood. For the

youngest mothers, pregnancy is an enactment of this childhood investment, simultaneously constituting them as childlike and mature. Their accounts were characterized by assertions and denials of agency, with the pregnant body acting as an undeniable fact ('this belly's not going anywhere!') that must be accommodated by those involved. These young women stand at the centre of familial dramas, often drawing on story lines from soap operas and celebrity culture to understand their situation, and birth tended to be a collective affair involving mothers and friends as well as partners. For women in the middle 26-35 age group, pregnancy was usually narrated in terms of 'the right moment', 'getting organised', 'settling down', and a 'natural progression'. **Where pregnancy was planned and wanted it was characterized in terms of a synchronization of individual, couple and peer biographies.**

Unless women had experienced infertility, embodiment was not emphasized. Instead, accounts focused on lifestyle, foregrounding choice through deliberation over the balance of work, parenting and homemaking – themes resourced in turn by a plethora of celebrity and parenting magazines, books, websites and TV programs. In general these women anticipated giving birth with their partners, often aspiring to as 'natural' a process as possible. Older mothers tended to characterize their pregnancies as something that 'almost did not happen', a 'last chance', or 'impossible dream'. The body is at the centre of these accounts, a source of wonder and anxiety, with motherhood conceptualized in terms of a rather private adventure, open to a range of meanings and relatively unconnected to the biographies of peers. These women were less likely to draw on resources that emphasized the lifestyle dimensions of mothering and sometimes went out of their way to distinguish themselves from such representations.

Our data suggests that **age is the master category through which normative notions of mothering are constituted**, with a powerful discourse of efficient biographical planning incorporating social class, and mediating differences of sexuality, ethnicity and disability. In biographical terms, motherhood can signal the end of childhood, the last gasp of fertility or the centre of a project of self. The 'common culture' of mothering constructs motherhood as the centre of a female choice biography, associated with the challenge of synchronization, and the enactment of cultural distinction through consumption. This

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dominant representation marginalizes the experiences of younger and older mothers who are seen as suffering from insufficient or excessive agency respectively.

What are the intergenerational narratives concerning motherhood? How do they resonate with theories of individualisation or shifting patterns of interdependence?



Our approach to understanding intergenerational connection has been informed by work employing narrative as an indicator of relatedness (Edwards and Strathern 2000) and approaches to family biographies that identify 'dialogs' and 'scripts' as a medium of connection and separation (Rosenthal 1998, Byng-Hall 1995). Birth is an intergenerational act, resulting in an intensive traffic of conscious and unconscious meaning within a family – a moment when daughters 'come into focus', siblings relationships are revitalized and mothers are rediscovered in one's own embodiment (Pines 1997). Interviews enabled us to capture much of the conscious identity work in this area while case studies suggested the significance of less conscious exchanges and the complex interplay of historical, generation and biographical time (Bjerrum Nielsen and Rudberg 1994).

In initial interviews expectant mothers signaled their orientation toward intergenerational influence. **A significant group considered the experience of their mothers as irrelevant and out of date.** The source of this ambivalence towards the past varied, but included the experience of upward social mobility (Brannen et al. 2004, Lawler 2000),

the desire to break with traditions, and fears of reproducing problematic patterns of attachments. In instances of intergenerational rupture women might invest heavily in peer maternal cultures ('club-mum'), and/or the couple ('us against the world'), sometimes asserting relatedness with their partner's family or focusing on alternative figures within their own. Other women presented themselves as being open to identifications with their mothers. This was most profound when mothers were absent, due to death or physical distance, with women expressing powerful longings towards mothers and the 'home' that they represent. Intergenerational proximity could also be associated with downward social mobility and the pooling of resource. In claiming connection women were also asserting the kind of mothers that they wanted to be. Intergenerational claims included bodily inheritance (in areas as infertility, ease or difficulty with birth and breastfeeding), biographical inheritance (the identification of role models for both working and 'stay at home' mothering), and cultural inheritance (expressed through shared values concerning parenting and personal appearance) (Irwin, 2003). A theme of intergenerational recuperation also emerged where **women understood their biographies as an extension of their mothers' – realising thwarted ambitions for education or career, or repairing the isolation or hardship that their mothers endured.**

From the case studies we developed more complex understandings of intergenerational processes, narrated from different positions within a wider constellation (Stern 1998). This data enables us see how identities and practices formed in opposition, may in fact secure continuities in changing historical conditions. By focusing on the dynamic flow of families in time it becomes possible to understand how reinvention is a necessary expression of continuity, complicating the simplistic conception of social change implicit in theories of individualization and detraditionalisation (Bertaux and Bertaux-Wiame 1993/2005, McLeod and Thomson 2009).

Discourses of change and continuity arise respectively from identifications within and between generations (Hockey 2008). Grandmothers told a story of progress concerning the changing situation of mothering, emphasizing the increased involvement of men in birth and sometimes parenting, and an increasingly sociable,



public and material enactment of mothering – captured in practices of baby massage, support groups and the availability of labour-saving products. Yet these **gains were associated with losses – including the creation of demanding babies and an intensification of the rhythms of daily life**. Deliberation over childcare and whether women ‘would’ or ‘could’ stay at home, was the most sensitive of all intergenerational conversations. Women variously reproduced, recuperated or rejected the practices of their own mother. But whatever their strategy, it was constituted in conversation with their own experience of being parented, and circumscribed by their socio-economic circumstances. Some of the most stressful intergenerational dynamics occurred where the daughters of stay-at-home-mothers opted for full time work, or the daughters of working mothers opted to stay at home. In such cases both parties struggled with feelings of rejection and failure.

How does being a mother change women’s identities? What forms of entitlement (or loss) does it bring and what social practices/ actions and forms of solidarity does it incite?



In the initial interviews women either resisted the idea of identity change or they embraced it. Resistance was most apparent among those who feared the loss of career status and continuity and in the narratives of younger mothers who feared the loss of an emergent sense of ‘me’ distinct from the wider family. Those embracing identity change tended to see motherhood as an opportunity to escape the domination of work or schooling as biographical domains,

sometimes reflecting a perceived lack of recognition in these fields (Henderson et al. 2007). One of the attractions of motherhood was the potential to abandon an individual project of self, putting others first and entering into a collective endeavour. The losses that women spoke of in this first interview included bodily attractiveness and integrity, intimacy of the couple, generationally based leisure and educational or career momentum. Anticipated gains included connections to the past and tradition, to peers also engaged in mothering, increased status within the family, and a greater vitality and intensity in living. Questions concerning identity change were most meaningful to mothers in the 26-35 age group for whom the idea of ‘choosing’ to be a particular kind of mother had salience, and homemaking, consumption, and parenting practices were arenas for the expression of maternal identifications. For others, pregnancy was not experienced in terms of choice – possibly because identities were considered to be either overly or insufficiently established to make change meaningful, or where motherhood was assumed as an inevitable life stage.

Revisiting women a year after birth gave us a very different insight into identity change. **At the second interview women reported profound changes that were less easily narrated - transformations to the temporal, spatial and emotional fabric of their lives** (Baraitser 2008). Phrases used to capture this shift in ontology included ‘being the same person in a different country’; being ‘more connected to the world’, and having one’s own ‘wellbeing dependent on another’. Many had returned to work or education by this time and often struggled with incompatible timetables and the challenge of convincingly performing as their old selves. Women’s experiences of returning to work differed dramatically according to how permeable the workplace was to maternal identifications and practices. Some were able to express both while others spoke of having to eradicate all signs of mothering while in the working environment.



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How have women of different generations imagined and practiced motherhood? What resources and advice do they draw upon (texts, people, products, community) and how does this fit with other identities, life plans?



The terms in which women imagine the transition to motherhood are defined by the generational unit to which they belong(ed), with accounts reflecting the norms and expectations of their time and social location (Mannheim 1952). Grandmothers tended to describe environments less infused by popular and expert advice, although some saw themselves as being pioneers of new approaches to birth and parenting. Women becoming mothers in the 1950's, 60's and 70's generally recall a time in which mothering was more taken for granted, where 'we just got on with it', with less reliance on antenatal classes, or independent research. The dominant discourse of 'choice' that shapes contemporary constructions of mothering is less evident in their accounts, with ideas of 'life planning' applied in retrospect.

The very idea of imagining motherhood assumes agency, and where women's pregnancies were unplanned or unwanted they struggled to formulate narratives of the kinds of mothers that they would be. Those women who constructed motherhood as part of an explicit project of self tended to have highly developed narratives, drawing (often ironically) on popular cultural resources which in turn construct choice through a series of binary divides between: natural and medical births (associated with a commitment to NCT

or NHS antenatal classes); child and adult-centred parenting (exemplified by the 'Baby Whisperer' vs Gina Ford's 'Contented Baby') and the provision of factual information and lifestyle advice (Hardyment, 2007). Although women of all ages and backgrounds drew strategically on the 'common culture' of mothering, it was women in the 26-35 age group who tended to position themselves in relation to these distinctions.

Most of the women we interviewed had enjoyed preparing for the arrival of the baby through shopping, sorting and decorating (Young 2005). Our visual data reflects the contrasting situations from which women embarked on this project: **some had just a corner of a room or a drawer in which to create a new world, others expanded the project into newly acquired four bedroom houses.** A minority refused to engage in such activity due to superstition and fear. Material objects were bought, borrowed and received, and the intensive transaction of goods in the final weeks of pregnancy can be seen as mapping the web of obligations that frames the arrival of a new generation. Material culture also played a part in imagining birth, with pools, pain management techniques and carefully packed hospital bags enabling women to gain proximity to the unknown. The graphic representations of birth broadcast on the Discovery Channel also prompted conversations between women and birth partners about roles, plans and pain.

Experience with children was an important resource in imagining motherhood and where women had responsibility for childcare within families they tended to draw on it. Nursery nurses, teachers, childcare workers and others sought to transpose knowledge developed in their working lives into the project of mothering. These included 'anxiety provoking' knowledge of child development, pedagogical and disciplinary techniques and more general skills of project and people management. Women also used mothering as a resource for imagining work, providing competences for potential careers in midwifery, childcare and teaching.



What part do men play in influencing women's expectations and experiences of motherhood?



Men are central to the definition of the situation of mothering, even when apparently marginal or absent. A significant majority of the women in our study were approaching motherhood within a more or less established heterosexual couple. In two cases involving donor insemination the biological father was absent from the enterprise. Sometimes fathers were physically distant, yet imaginatively central, including cases involving migration, and where couples did not live together. The duration of the existing couple relationship had implications for the perceived challenge represented by parenthood. **Well-established couples might fear the loss of lifestyle or intimacy, or embrace the new situation as a shared adventure. Others had come together around a shared desire to parent, or parted as nascent relationships were overwhelmed by its demands.** In all cases, the situation of mothering was characterised by the challenge of synchronisation.

Women were invited to nominate a 'significant other' for interview and in five out of twelve case studies we interviewed male partners. From these we gained a sense of the salience of fertility, paternity, responsibility (moral and financial) and a complex and sometimes troubled relationship with the

embodied experience of pregnancy and birth. Otherwise the role and contribution of fathers was narrated by the expectant mother, grandmothers and friends, providing a sense of how fatherhood is defined and scrutinised by others. While parenthood was generally seen as a joint endeavour, the extent to which couples embraced a division of labour varied. For some, the project was shared, associated with a commitment for the father to be at the birth and to share in feeding and childcare. These men tended to attend antenatal classes and helped prepare for the baby's arrival in terms of researching, reading, watching, shopping, constructing and decorating – activities that could expose differences in values that may have been insignificant at earlier stages of the couple relationship. Others embraced a division of labour, ceding authority over domestic and parenting matters to mothers. Such negotiations within couples had consequences for the kinds of intergenerational flows that would come to characterise their emergent 'family' life.

Grandfathers were also present in new parents' accounts, with childhood identifications as 'daddies girls' and 'mummies boys' demanding re-evaluation. Some of the men were revisiting well worn family stories concerning their own fathers, and new parents' interview accounts drew heavily on the perceived quality of their own parenting. The imminent arrival of a new generation could force the re-emergence of old family conflicts and offer the promise of resolution or retrenchment.



Voices



The diversity of mothering situations means that challenges associated with new parenthood are too often experienced as private problems rather than public issues. In this section we gather together quotations from our research participants, organised in relation to key policy and practice relevant areas: work, birth and change. These voices illustrate the commonalities of women's experiences as well as the ways in which they differ. They also highlight the paradoxical role of choice in the transition to motherhood, something that women desire, and expect, but which for many is not realized in their experience of birth and combining work and mothering. These voices also communicate some of the confusion, anxiety and excitement associated with first time parenthood, and how different generations respond to changing expectations, demands and conditions.

Work

Being pregnant at work and school

To get on in a male environment you do have to have a certain personae, it gets you through on a daily basis and I just felt very vulnerable having my figure changing and people noticing all this going on about me ... people feel that when you're pregnant they think its quite acceptable for them to go alright fatty, and its just not nice. **Events manager, 40**

When I first announced I was pregnant, people's reactions, even females at work, was very different to me - somebody that is quite high up in the hierarchy - suddenly people weren't asking me to make decisions. **Teacher, 36**

Pupils can be quite cruel, and they wouldn't expect you to be going to school like that. And the school did want me to stay, but I didn't want to, so I didn't. **Unemployed, 16**

I felt so SICK, and so suddenly my ability to juggle everything and do everything kind of started to fall apart at the seams. **Market researcher, 40**

I started the new job in March. So obviously the first thing I had to say was that I was pregnant. And it's led to - although people have been very nice, it's led to quite a lot of paranoia for me about - well sort of, about being SEEN as a bad colleague. And also it means having lost quite a lot of maternity rights and benefits. **Lecturer, 41**

They wanted me to go on a school trip to the seaside when I was about 34 weeks. And they said, "You have to go. There's no choice." And actually that was wrong information, but I had to phone my union and find out. Before I said, "You're wrong," you know, I had to sort of get some back-up, which was really stressful. **Nursery teacher, 29**

Where I work, because everyone likes children it's really, really positive and people ask you questions and they're so caring and interested.

Primary school teacher, 35

The odd time when I've had to go into meetings, I've had to be smart with suits and stuff, and my team are all like, "Oh my God, you can really see your stomach." And I'm a LITTLE bit embarrassed at times. 'Cos I'm sort of thinking, you know, this is me being a woman, and this is me having a baby. **Manager, 27**

It is very difficult to negotiate the whole work thing. And there is a sort of "Oh God, she's only been here for a year and she's off having a baby." And then you think about it and think, "Well where do you WANT the next generation to come from?" **Gallery manager, 39**



Work's horrible, my boss said, "How could you let this happen?". He's been quite hostile about things, about how I'm letting the side down and how he has to pay for my maternity leave, when he doesn't actually, (laughs) because he gets to claim it back.

Events manager, 32

My instinct was to think that, "Crickey, I'm freelance, I'm trying to get all this work, people aren't gonna want to employ me because I'm pregnant." And in fact I found it quite the opposite. I do work in quite a female industry – or at least family industry, a lot of people have got families and juggle their lives, so do understand, yeah. **Journalist, 33**



Making decisions... before you are ready

A lot of people now are saying, "Wait and see, you might not be back in September. Will you do a job share?" And I just don't know, 'cos I dunno what I'm gonna feel, or what it's gonna be like. **Primary school teacher, 27**

I do have an opportunity to leave work and stay at home and raise the child full time, be with the child full time so it's an option that I'm very very seriously considering. In fact I'll probably have to make my decision by next week because I'll have to give them a month's notice if I were to leave work.

Careers advisor, 30

Rather than say, "Fantastic, you know, there are more women graduates from medical school, we need women to be role models and have kids and all the rest of it, it was more like um, "Right, you're going to have maternity leave, so when are you coming back to work? We need to know for sure," and all this sort of thing. And it's like well actually that's not what the maternity guidelines say, and you can't say when you're going to, you just don't know. You know, you can guess and all that, but you just don't know. **Doctor 32**

There's so much research to say that children should be at home with mum and in a play situation and there's also so much pressure particularly in a town like this that mum's got to go back to work as fast as they can and the child is only stimulated if they're in a day nursery. **Nursery teacher, 33**

Making the most of maternity leave

It only covers like maternity pay but it wouldn't cover people being sick. Sometimes they're sick all the way through and really struggle, so I think they should change something.[pause] That must be every parents nightmare.

Administrator in family business, 35

Where I work, it's very business orientated. You know, pregnant or not, get in here and work as hard as anyone else really, you know. I don't get any special treatment... And it's unfortunate if you are ill in your pregnancy, because then of course you have to start your maternity leave then. Which I think could be looked at, I think that's really unfair. And I've had to fight where I work, literally fight to get a better package. I've had to go to my union, and get a rep involved to fight for a better package, because um the package was really – well it was the minimum, it was the minimum that a business should offer.

Nurse, 32



I mean it's all very well saying you get paid, but you get £100 a week, it's not exactly PAY is it? You know, before tax and national insurance. So when they sort of say Maternity Pay for six months, and when you've been earning, you know, like I'm not saying I'm a lot bigger earner but I'm, you know, above average, and then you go down to £100 a week. Yes it's something, but it's not like you're getting paid. Yeah it's just um I mean I'll be lucky to cover my sort of endowment and standing order, just my real bare necessities.

Sales executive 39

I think there does need to be more information about what exactly people are entitled to. Because I had a bit of problems at my work, with them giving me out of date forms and things. And I was never given the proper forms, and then the guy ended up getting me just to sign the back of it and saying he would sort it out, which I wasn't really too happy with.

Nursery worker, 40

Even before I fell pregnant, and even when I was pregnant in the very early stages where nobody knew, there was always jokes about, "Oh don't hire women. And they fall pregnant," and things like that. And, you know, it's (.) a bit of banter there, but there is sort of a part of you that thinks, "Well actually maybe they are telling the truth and that is genuinely what they think." **Manager, 27**

Affording choice

I have to go back to work, can't afford to stay at home.

Beauty therapist, 24

I'm more concerned with things like giving it sufficient love, giving it sufficient security, than things on the material side. But then that's perhaps easy for me to say, because I can actually afford the material side of things.

Self employed training consultant, 48

I'd love to look after my own children, I don't know part time maybe. If I can get somebody to look after the baby you know for a few hours a day, just to get out and also help financially. **Waitress, 31**

I'm thinking yes I will go back but it depends on a number of things. I haven't got a job to go back to so I'd have to find another one and it all depends on money really. ...I would hate to pay to go to work just to pay childminding fees. **Administrator, 29**

Its financial reasons, purely financial reasons. We still need to pay the mortgage and we need to pay the bills. We'd just about survive on what my husband brings in but it would be nice to have you know little treats, like to be able to go on holiday, you know to have days out and stuff, as a family group.

Administrator, 33

I worry about can you do it all. Can you work? I suppose our generation are really lucky that you know you can do it all. But then I was thinking well do you want to do it all? Do you want to work full time, work forty hours a week and have someone else look after your child and then come home and you spend 10 minutes with it before it goes to bed so you miss it crawling, you miss it talking all those kind of things? I am worried about that but that is the next thing I have to get over, I will cross that bridge when I get over it. I may want to go back to work full time in January or I may want to stay home bake cakes and keep chickensl. That would be fine as well.

Librarian, 33

Work, identity and independence

Because I've never been off work (laughs) for anything more than about a fortnight, you know, since I was 16 years old. So that's going to be an amazing difference. I just can't imagine what it must be like just being at home day after day, and not having to go into work, and not having to juggle stuff, having time to do things.

Administration manager, 42



I don't think about work at all anymore, work is my least priority in the world. I'm not bothered about buying myself anything or too much in to how I look or anything like that, its all about baby

Teacher, 30

I remember leaving, driving away from the school thinking, "Oh (laughs) so now what?" You know, OK I know why I'm leaving, and I'm having this baby, and having a completely new life and a new way of doing things, um but I did suddenly think, "Oh heck, well I'm not bringing any more money in." **Teacher 32**

My priorities are changing, I think. Because I realise now that my job's not going to be the only thing in my life. And I think I'm looking forward to it, I think. I think it's given me the confidence to say that I can do something else. **Events manager, 32**

Well before I wanted to be independent you know I had a job to do and I would make sure that I had it done no matter what, no matter what it costs, but now its... I've had to learn to rely on other people but I know that my job will still be there tomorrow and the work I was doing will still be there, and...if I need help then I've got to ask for it. So I have learnt. **Administrator, 33**

The day I stopped working full-time I suddenly became very panicked that I wouldn't be able to fend for myself, earn my own money. I've never been dependent on anyone else in my life before – OK parents, but not for 15 years... You suddenly have to think about being a family and a team, you know – team money as opposed to individual money... I'd hate to be home all day and my partner be enjoying the world. I think I'd feel terribly jealous, and also a bit of a nothing within the partnership.

Journalist, 31

From when I started at Sainsbury I said I'm just gonna work for myself. If I become pregnant I'm gonna work for my child, that's it, no one else... if I was pregnant again, it wouldn't stop me working. Because – because I'm used to working.

Retail worker, 23



Birth



Choices?

'the older generations experience is so different to what we're able to experience these days that a lot of it is well 'we just got on with it' in our days kind of attitude. They're slightly bemused by the millions of different options that we've got for labour in terms of like, natural remedies, machines, that kind of thing. In my parents day it was very much you know gas and air, pethedine and that was it, You were on a bed and that was pretty much it. But obviously these days they encourage you to be more active, and use water and things like that. **Teacher, 32**

She started saying well er...if you're not really fit you can't have a home birth, you know if there's any weakness in your arms then you're not in 'tip top', is the phrase she used, then you're too much of a risk for home birth. **Lecturer, 30**

You don't give birth at home, but you stay at home then when you're about 8 cm dilated - so you're not surrounded by everyone in the hospital - then you go in to hospital. But you have like two midwives around here and you have like gas and air, everything here. Then they phone an ambulance and they take you to the hospital to give birth. Its just so you're around your surroundings and you're relaxed and stuff...Yeah I think its better to have it like that, where as if you're in hospital you're not, you're not relaxed really are you, cos you have everyone and everyone walking in looking at you. If you're here you've just got your two midwives and then you go in and give birth. **Student, 15**



They said oh basically when you ring up the labour ward just tell them you want the birthing pool and if its there you can have it - if it's available. If it's not available you can't have it... I don't know really I would have expected somebody to sit down, maybe they don't have time. To discuss each thing with each individual person but, so yeah if I want this birth I shall have to let them know when I go. **Administrator, age 29**

Relationships and care

My midwife is alright just a bit rude towards me because of my age and that but she's alright, don't bother me, its only my midwife and I'm going to change soon anyway. She's just a bit stuck up towards me.' **Student 17**

I suppose it's the way they've been trained, I'm not sure, maybe they don't need to tell the patient too much. But I'd rather expect the worst than expect to go in and come out the next day and think oh brilliant, I don't want that. **Events manager, 41**

Now I'm 30 coming up 37 weeks, still nobody has asked me what I want, and I thought maybe somebody would have....I don't know really I would have expected somebody to sit down, maybe they don't have time to discuss each thing with each individual person but, so yeah if I want this birth I shall have to let them know when I go in.

(Administrator, 39)

I just feel that I'm, in terms of pregnancy, I'm just a file, a piece of paper. So OK, fair enough, it's good that anybody else can help, because they just look at the file - but still you don't have that closeness with anyone. And I can't call the midwives. I just don't feel like they want you there. They just get you in the room, examine your pee, and then that's it - bye. (laughs) **Unemployed, 26.**

I was actually shocked how little you see your midwife but I've since found out that that's normal. I went to a pregnancy yoga group and some of the women there said they had a private midwife, and I thought oooh what's that I want, sounds good. And once I looked in to that I just though well actually I get good service with NHS and spending 3 grand on a private midwife would be a waste of money, I'd rather have a ticket somewhere nice next summer and take the family away. So I just got myself away from those groups with those people **Teacher, 36**

It's very difficult, because you get a different midwife every time. I have to say, that it would be brilliant if you had one person who you knew was going to be your midwife, so you could build a relationship with them. Hiring a private midwife (laughs) is very expensive, it just – it wasn't feasible. But I would love to know who is going to be there. (laughs) **Gallery Manager, 39**

Knowing What to Expect

I don't know what it's going to be like, so I don't know what I want. So yeah I'm – I'm worried because I don't know anything. And it's a very unusual situation for me to be in, to not know anything, being quite a controlling type of person. **Events manager, 32**

My mum didn't even have any pain relief she said the gas and air made her feel funny (laughs) so I am thinking, 'Mum I am the same shape as you, I hope it is going to be the same for me!'. **Librarian, 33**

She's had all natural births. So HOPEFULLY, hopefully I'm hoping I'm gonna be taking after her....Obviously I don't wanna end up having five kids, but hopefully all the ones that I have, I'm hoping that they're gonna be natural births. **Beauty therapist, age 17**

I'm scared of the pain. (laughs)...: Yeah, so I want to be somewhere where, if I can't cope with it, you know, I've got lots of things in mind, lots of techniques that, you know, they teach you at antenatal classes or at antenatal yoga, and um I've got a Tens machine, so I'm going to try and resist the drugs as long as possible but (.). **Teacher, age 35, city**

Yeah the labour is the one thing, that I'm having nightmares about that's the bit I don't want, I just want them to come in to the world without affecting me at all. **Teacher, 30**

I'm not scared about labour at all, I'm like the calmest person about labour. It will happen, I will not die of the pain. But I am concerned about whether everything will be OK with the baby. Because I feel like this is a real last chance saloon for me. And, you know, of COURSE there are possibilities of getting pregnant again, and it does happen for people, but I know the struggle I had to get to this point.

(Market researcher,40)

Close friends that have just said, "Oh for God's sake, if the pain gets too much just go for an epidural. I had one and it was fantastic." And you listen to your friends, don't you? They are your main, you know, advisers really. **Nurse, age 32**

Judging and managing risk

I do want to have the baby in hospital, rather than a birthing-midwife led unit because it's a bit scary, one...two friends have had these emergency caesareans and I'd rather not be in a position with a midwife either at home or in a midwife led unit with no doctors around. And then being put in an ambulance because it all goes pear shaped, so I'd prefer a doctor, not to be there but to be in the same building. **Teacher, age 33**

No he did ask me did I want a home birth or at hospital and straight away I said hospital because it would be my first child and in case anything goes wrong I want to be there with everybody. **Administrator, age 35**

I think I was quite secretly glad, that it had got to that point where I had to go in to hospital, but also yeah I don't know just imagining the logistics of having the pool and filling it and doing all that, so it was just of kind in a way, up to the delivery day just like a bit too much like hard work in a funny sort of way. **Civil servant age 39**



I am a bit apprehensive about that to be honest because of my age, because it's the first time I am a mother but I prefer to have monitors, having doctors around, being in a hospital, everything modern and everything ... yes. Because I never know; I prefer to have professional surroundings, all the machines and everything, yes.

Self employed language teacher, 43

Birth and identity

I just want it to be all natural. So you – yeah so you FEEL, you know, so you get the feeling of what my Mum's been through to, you know, to give birth to me. And it's just that extra – it even gives you that extra feeling. Do you know what I'm saying? ... Maybe it will affect the person that I'll be, I'll probably end up being afterwards. **Beauty therapist, 17**

I'm really looking forward to the whole process of labour. Everyone's saying how bad and painful, it sounds crazy but I really want to know what it feels like, I want to be there and done that at least I can say it, I know its going to be really really painful but I just want to really to experience it. **Events manager, 41**

Some people think that birth should be a painful experience and you're not going to be a mother until you've gone through that and...I can't see the point really, so I think I might well end up having an epidural... But I don't I don't want them to think of me as a second class citizen if I have to have an emergency caesarean or have pain killers. I don't want them to make me feel a failure.

Teacher, age 33

I think there is just no way that I would put myself in a situation where there were no doctors, no hospital right next door...the baby hasn't said to you, "Excuse me Mum, I want to be born in a birthing centre," it's you, it's very much YOUR thing. **Doctor, 34**

At the end of the day it comes down to what's needed and what's best for you and the baby so, if it has to be it has to be.

Administrator, age 35

Birthing partners

I was quite keen to have another birth partner at one point, my best friend, and he was like, "No it's just gotta be you and me."

Journalist, age 33

But I think there is a lot of pressure, all that cutting the cord and, you know, it didn't used to happen years ago. I mean you don't have to, do you? Why do you have to see all that? And also I don't particularly want him to see me at my absolute worst, (laughs) you know, screaming like a pig. So I mean we'll see how it goes. **Sales executive, 39**

But I just really basically want Mum to be there, one of my cousins, and the Dad. But he said he doesn't wanna be in there. But I don't really mind actually if he's not there, I just want him to be THERE, like outside, there, so I know he's around. **Unemployed, age 17**

And birth stories....

She washed all the towels, opened a bottle of champagne for us, let me and my husband go to bed for a few hours and gave you a big cuddle didn't she? It was great. When she said oh I'll be your birth partner, I thought for a second before I said yes, I thought is that going to be weird and I thought no its not going to be weird. **Librarian, 33**

The consultant said we're not starting without dad, so we just waited until he got there ... and he held her and I can remember him just bringing her round and keeping showing her face to me and then they just lay her across my chest for me to hold which was wonderful.

Self employed training consultant, age 49



BIRTH

And she was like really doing all the proper breathing, cos I said that's the easiest way to deal with it ...and she was good you know...its not going to get any...will these pains get worse, and I was thinking well...you're making a lot of fuss you know for you, its not like you and at the back of mind I was thinking, she's having the baby.. that's what she's doing.... She said to me 'mum I need to push', so I said I can have a quick look, and when I had a look I could see the baby's head. So I went out in the corridor and I said look we need somebody here now...and nobody came and so I went out, NOW we need somebody NOW, and I didn't want to upset her partner you see, or frighten her really.

Mother of 36 year old accountant

The midwife asked me if I wanted to hold him and I'd never held a baby before, you know, and Monica being stitched up and I just said, 'Oh, ok.'. It's just really odd. And just the whole thing is odd because it's not how you expect ... you have this horrific, sort of, experience and it's, sort of, doubly horrific because you're the one who's not pumped full of drugs and you know what's going on and yet you're not actually, you know, it's your wife that is going through all this.

Partner of 39 year old civil servant

Change



Mothers/Grandmothers

Progress and decline

This incredible choice, and stuff that is apparently essential these days. And no doubt my own mother thought exactly the same thing about us, because we had far more things than the previous generation. She goes to huge numbers of classes – baby massage, baby sing-song, none of which existed ... When things become available then you become used to them and you feel you need them. It's definitely more social, the need to go out of the house to meet people just wasn't there before.

Grandmother, 65

They've got a lot more advice on things like disease and injections, they've got a lot more things where it's made easier for them... nappies and things like that. Because it wasn't like that in my time, it was like you washed them and things like that. Its been made a lot more convenient for mothers. These days... you've got all the new gadgets and things, but yeah price has gone up... But the pressure on mums: you've got to have the best buggy, you've got to have the best clothes, this and this - which is crazy. I was never made to feel that in my time. **Significant other, 50**



I think possibly their lives are more frenetic and I don't know whether that was a good thing, really. Ours was much more leisurely because you just took the babies for a walk in the afternoon, a little shopping in the morning, and put them to bed at 6 pm, and fathers came home. Of course fathers are playing much more of a part of the whole business, which is wonderful. I think now that is an enormous improvement. Because we were twixt and between really I mean my mother - I don't think the husbands played a part at all. You would ask the father if you were desperate to change a nappy and he would really...not do it. **Grandmother, 65**

It's much easier to be a good mother now, because you've got so many things to help you in the house. I mean they've got dishwashers and washing machines, and things that just need washing. You don't have to iron, and disposable nappies, things we never had, you see. I mean it's EASY to be a good mother now. **Great Grandmother 78**

I think on the one hand today's mothers have a lot more time to spend with their children. Automatic washing machines and stuff like that. Unfortunately of course the other side of the coin is, now that they have this time most of them have to spend it working away from their children. So they've kind of gained something and yet they haven't. And I find that rather sad. You see I really, I wanted to be there. I always said I wasn't going to have children and have somebody else bring them up **Grandmother 68**

Bonding...that's a new word, the bonding with the baby. She makes me laugh, she knows I laugh, but when you have 'bonding massage', I mean it's getting a bit far isn't it? ... Anyway she was making quite a social life for herself.

Grandmother, 65

I have two lifestyles to compare with. I have the lifestyle of a mother in the Caribbean, and also lifestyles for a mother in England. And I think on both sides of the ocean it's changed. And for me, it's all become more - I can see it's become more materialistic... **Grandmother 42**

The house prices are so high now and people are forced to work. There's not so much involvement with grandmothers I think. In some cases there is but I think in the old days everyone lived with their mums anyway and got helped. So I suppose sometimes people do nowadays they do rely on grandmothers but that's if they're lucky if the grandmother is not working. Most grandmothers work as well and people are having babies still very young so the grandmothers are younger.

Grandmother, 48

I think professionally there's been more equality, which is a good thing. You see, years ago teachers were not allowed to work when they were married. It had to stop. I suppose we've come a long way in that respect. But I think it's good if you can work and still feel that you can give your child what they deserve, then that's fine. I wouldn't have liked to have had a job that I couldn't do that.

Grandmother, 74

I'm incredibly grateful to be born in the generation that enabled me to be a stay at home mother when my children were young, and at the same time to have the experience of being a professional person. That's ideal. Looking at the young mothers I work with, there's almost intolerable pressures on them to do both, it's impossible.'

Grandmother, 65

Its not parenting today, the kids do what they want, it's reversed. The kids today are the parents, and the parents are the kids.

Grandmother, 56

The past

Yes, I mean in Mum's generation the men didn't even go to the HOSPITAL. They waited at home for the news. And then they waited to find out when they could visit, you know, and there wasn't even a thought of it. NOW the man is virtually half having it. He's in there and he's, you know, RIGHT into the whole thing, cutting the cord and doing all sorts of things. So I think it's just wonderful, wonderful.

Grandmother 58

Never ever, ever read a book, I just relied on going to the gynaecologist. And he would just check me and tell me, you know, everything was alright, and this, that and the other. I think I went to a few classes to learn how to breathe. In those days, that's about all they taught you, was how to breathe. That was about all I did, that was all. And of course, when I had the baby, there were about five or six women having them at the same time, and so all the labour wards were filled. My husband wasn't there, of COURSE. So I was in the room, on my own TOTALLY when the labour pains hit the big ones, not the little ones, but the big ones. And I honestly didn't know what had hit me, what had struck me. **Grandmother 58**

At the beginning of the pregnancy I didn't realise I was pregnant, I went round to see friends, and she said I think you ought to go to the doctor you know, its not right, she knew exactly ...she'd had a baby so she knew what was happening so I went toddling off to the doctor and he gave me little blue tablets to stop me feeling sick. They were marvellous I took the whole course and I felt wonderful. After I'd had the baby my friend wrote and said...cautiously is your daughter alright, I wrote back and said absolutely fine, I mean one wrote letters in those days, it was so expensive to ring up. She said you took the full course of thalidomide. Now the big decision is, I wondered if I'd have known, would I have aborted the baby - which because in those days you either went to Harley St or Sweden. It was amazing really, I don't know what I'd have done, because it was one in three.

Grandmother, 65

I was huge I was always huge and I was even bigger with him absolutely enormous and everything at the front. You know. I would get whistled at from the back by the lorry drivers coming up. And then I'll be sort of killing myself laughing 'oh my god', because in those days we wore high heels and all this didn't we. And there I was walking along the street, you see, and I remember one particular...they use to whistle at you, but of course people don't do that anymore do they? **Grandmother 68**

You see, my mother was very old fashioned, Victorian. Even though she had, there were 8 children in the house there were 4 girls and 4 boys. I think in general, I don't ever remember people talking about things like that when I was growing up. Like today they're all in the open and 'it does this' and then 'I had that'. Nobody would ever talk about it - all I would hear from her is like, 'oh one is enough just have one'. **Grandmother 68**



VOICES

I was 21 when I had my first. My father really really put pressure on me because I wasn't married. I was to give the baby up for adoption and he even went as far as getting the doctors to come and give me the adoption papers for them to take my baby away from me when he was born. And I just thought I could never ever put anyone through what he put me through. For years I didn't speak to him. He would see me in the street and he'd walk down the other side of the street because I was a disgrace you know. And I swore I would never ever put any of my kids through what he put me through. So whatever decision she made I just knew I would stand by her whatever.

Grandmother 40

Because don't forget, you couldn't get things like toys. The only thing we were able to get her was one teddy bear, and that was sort of black market, and she's still got him, I think. You can't *pass on* things because things weren't made. To somebody of your generation, you've got no idea what it was like. I mean the whole of the city was flattened, bombed... We didn't have weight cards, they just kept that in the clinics when you went. I used to make little notes myself to know what she did, but I didn't keep those, they were just that I did myself. ... You never used to hear of cot deaths then, believe it or not. And you never heard of post-natal depression, we didn't have any TIME to be post-natal depressed because you were always queuing for food and essentials.

Great grandmother 78

Daughters/ Mothers

Intergenerational conversations

I was talking to somebody at work and I said, "Oh I have got to decide about what I want to do about going back to work and all this that and the other", and she said, "Can I say something and I hope you will take this in the way it is intended, at least you have a choice. I didn't have a choice when I was your

age, when I had my kids I had to resign and that was it, I stayed at home." And I thought, Oh is it better to have choice or no choice? If somebody said "right you have got to resign now and go and have a baby", would I be like, "This isn't fair!"; or would I be, "Oh okay then.?" (laughs) You know it is funny.

Mother, 33

I was in a shop, and they were talking to me. It was an older – an older lady, and she just sort of placed her hand on my bump and patted it, and I'm thinking, (laughs) "I don't even know you." But I think the older generation do seem to want to do that. My Nan asked me, when I was about a month pregnant, she said, "Oh come over here." And I went to stand by her and I was like, "What are you going to do?" And she said, "I'm patting your bump."

Mother 36

My grandmother told me that women, after about five months, in her day were not really seen out at all - just ordinary people - because it was sort of embarrassing, because it suggested they'd had sex (laughs) with somebody. AND I THOUGHT that was so funny, because, you know, what happens when you're pushing a pram? **Mother 36**

Maternal advice

A lot of the things are superstitious, like not moving big furniture's around because the baby might be born prematurely. I do try and please her, but I don't really believe in all of it. A lot of friends go along with it with their mum, even though we've been born here, you know it's the western life style, we still stick to some of it but we don't stick to all of it you know.

Mother, 31

I haven't really asked my mum for advice, I mean we have talked about stuff and she has said, " Oh it has changed so much since my day". So we have just chatted about how I feel and how I am doing and what is going to happen after the baby arrives and will she come down the third week after it is born and help me out if I need to and that kind of thing. But no I haven't really drawn on her for advice at all. **Mother, 33**



My Mum always said to me, “Don’t rush anything, don’t get married too early.” ‘Cos she got married when she was 16. At my age she had two children. So she’s saying, “Don’t be like me”. Yeah, “Don’t rush anything.”

Mother, 24

She will say things like, you know, “When I had my child we didn’t do all this shouting like you have on the telly” and “we didn’t have all these drugs.” And part of me becomes a bit of a truculent teenager at that point and wants to go, “Look, this was in the 1960’s, it was fully medicalised. And most women were kind of knocked unconscious.” Sometimes advice feels like - it’s hard to get a balance of advice that doesn’t feel like criticism.

Mother, 42

Changing material environment

The physical context of mothering is so different, you know: nappies are so different; driving and having a car, and my mother didn’t drive when I was a small child - so that makes such a difference to your world. **Mother, 30**

Because you get scans now and they listen to the heart beat and stuff then it makes it much more, you’re much more aware - not aware maybe that’s not the right word - but its constantly being reinforced that there’s this baby there. And I think you have more confidence that it’s going to be alright and stuff. When I talk to my mum I just think god how could you deal with that when you didn’t know really what was going on and you were just hoping that the baby was okay and if you didn’t feel them move it was really disturbing.

Mother, 42

Perspectives on the past

She was in hospital for about four days, even though I was completely straightforward. There was nothing wrong with her at all. She felt absolutely fine, or as fine as you do. And then she was transferred to a maternity home for the next fortnight, where she stayed. I don’t think she fed or anything – she did breastfeed me, but it was never 100%. And during the night, the nurses, or maternity midwives, they did it, they fed the babies and the mothers slept. And it was all about getting the mothers recovered and everything until they were ready to go home. **Mother 32**

Yeah well I don’t my mum hasn’t really spoken about breast feeding because it just wasn’t spoken about at the time, she was in the hospital and she was given a bottle. Back then she said that breastfeeding wasn’t as actively encouraged as it is now, where as nowadays its always breast is best. **Mother, 33**

Mum had a horrific time 40 years ago, um in really horrible environments in horrible hospitals with no partner there to help, or to reassure or anything. And I know that’s going to be completely different for me.

Mother, 33

A lot of people in that generation, I mean people were killed in the war, there was, you know there were quite a lot of different circumstances. I think there were also hidden circumstances, rumours of cousins not quite being cousins and people you know, getting pregnant by other men or whatever. Nothing is quite as straightforward as we think it might be.... people just muddled along. A lot of it was to do with economic circumstances, and space, who was fit, and who was well and around.

Mother 44



Dis-Identifications

I wish I was like my mother. But of course I cannot be because ... Ok, I see lots of positive things about my mother but not everything. For instance, I wouldn't sacrifice so much, being so careless about myself. What I see about my mother is that she gave everything; she didn't need anything because it was all for us. I think this is not a good education for your children because you have to put them limits, saying, "You are important but I am important too. You have your space but I have my space too." In that sense I think my mother was more 'us' than 'her'. **Mother 43**

It used to be like the woman looking after the child at home so many years ago. But in my husband's culture and in my culture it's different. My Mum's been working since I was 1. So she had people to look after me. With me it's completely different because I want to be the mum who is going to do all those things that mums do at home, cook, clean, look after the kid. **Mother, 26**

She married my Dad, even though she didn't really know him and they didn't really get on, but 'cos she felt like she had to. I think now people have got a lot more options open to them, which is good. You know, there are a lot of people that don't have to feel like they have to have a child, or get married, have kids straight away when they're quite young. I think, if people want to, they can go out and experience things for themselves, which I actually think can be a benefit to you as a mother. **Mother 40**

They wanted us to have a good education, but my mum didn't have a good education and she felt like she missed out on that, and we've even got a letter now that we found in the house that said, that she'd passed for grammar school but she was never allowed to go because she would have had to stay until she was 16, and her parents said no you've got to finish school as soon as you can and go and work. So she always felt like she'd missed out so she was determined that we would have a good education so that was a very very important thing, you know in our lives.

Sister, 52



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Appendix – description of sample (Interview sample)

| City | Age | Occupation | Social class | Ethnicity | Marital status/ living arrangements |
|------|-------|----------------------------------|--------------|--------------------------------|---|
| 1 | 17 | Beauty Therapist | W/C | Asian Bangladeshi | Married |
| 2 | 26 | Unemployed | W/C | Rumanian/Russian | Married |
| 3 | 26 | Self Employed IT | LM/C | ESW (English, Scottish, Welsh) | Married |
| 4 | 31 | Nursery Teacher | LM/C | ESW | Married |
| 5 | 32 | Student | W/C | Greek | Married |
| 6 | 32 | Nurse | LM/C | ESW | Cohabiting |
| 7 | 32 | Events Manager | UM/C | ESW | Married |
| 8 | 32 | Fundraiser | LM/C | ESW | Married |
| 9 | 33 | Journalist | LM/C | ESW | Cohabiting |
| 10 | 34 | Doctor | UM/C | ESW | Married |
| 11 | 35 | Primary School Teacher | LM/C | ESW | Married |
| 12 | 26-35 | Student | W/C | Turkish | Married |
| 13 | 39 | Gallery Manager | UM/C | ESW | Married |
| 14 | 39 | Civil Servant | LM/C | ESW | Married |
| 15 | 43 | Self Employed Language Teacher | LM/C | Colombian | Married |
| 16 | 24 | Beauty Therapist | W/C | Turkish Cypriot | Married |
| 17 | 21 | Chef | W/C | African-Caribbean | Married |
| 18 | 27 | Primary School Teacher | LM/C | White/Australian | Married |
| 19 | 27 | Manager | LM/C | Turkish Cypriot | Due to marry in summer |
| 20 | 39 | Sales | LM/C | ESW | Married |
| 21 | 23 | Supermarket Assistant | W/C | Turkish | Married |
| 22 | 18 | Student | W/C | Mixed race: A-C/white | Not married |
| 23 | 28 | Unemployed | W/C | ESW | Engaged |
| 24 | 40 | Manager of Nursery School | LM/C | ESW Scottish | Not married |
| 25 | 42 | Counsellor | LM/C | Turkish | Married |
| 26 | 40 | Researcher | LM/C | American | Married |
| 27 | 36 | PCT Manager | UM/C | ESW | Lesbian planning civil partnership |
| 28 | 44 | Executive Voluntary Organisation | UM/C | ESW | Lesbian planning civil partnership |
| 29 | 20 | Shop Assistant | W/C | ESW | Separated, single Lives with her dad |
| 30 | 36 | Teacher | LM/C | ESW | Married |
| 31 | 17 | Unemployed | W/C | Black Caribbean | Partner lives in neighbourhood |
| 32 | 16 | Unemployed | W/C | Mixed White/Carribbean | Lives with family, partner will move in when baby is born |
| 33 | 42 | Financial worker | LM/C | ESW | Single (pregnancy via sperm donor) |

| Town | Age | Occupation | Social class | Ethnicity | Marital status/ living arrangements |
|------|------------|---|--------------|------------------------------|---|
| 1 | 15 | Student | W/C | ESW | Boyfriend, living at home |
| 2 | 16 | Student | W/C | White African | Single living with mother and siblings |
| 3 | 17 | Student | W/C | Mixed race- Carribean/ White | Single, mother and baby unit |
| 4 | 17 | Student | W/C | ESW | Single, mother and baby unit |
| 5 | 17 | Student | W/C | ESW | Living with boyfriend |
| 6 | 18 | Student | W/C | ESW | Lives with father of baby and his family but she is single |
| 7 | 24 | Unemployed | W/C | Asian (Bangladesh) | Married |
| 8 | 17 | Unemployed | W/C | ESW | Living with partner |
| 9 | 28 | Fundraiser | LM/C | ESW | Married |
| 10 | 29 | Administrator (PA) | LM/C | ESW | Married |
| 11 | 30 | Teacher | LM/C | Asian | Married |
| 12 | 31 | Waitress/ Unemployed | W/C | Asian (Chinese- British) | Married |
| 13 | 32 | Teacher | LM/C | ESW | Married |
| 14 | 33 | Teacher/ Nursery Head- Unemployed (for early years) | LM/C | ESW | Married |
| 15 | 33 | Librarian | LM/C | ESW | Married |
| 16 | 33 | Clerical worker | LM/C | Asian (Sri Lanka) | Married |
| 17 | 33 | Administrator | LM/C | ESW | Married |
| 18 | 35 | Administrator for family business | LM/C | ESW | Married |
| 19 | 26-35 | Post graduate student | LM/C | African | Married |
| 20 | 36 | Accountant | LM/C | ESW | Cohabiting |
| 21 | 39 | Customer Service | LM/C | ESW | Married |
| 22 | 42 | Administration Manager | LM/C | ESW | Cohabiting |
| 23 | 49 | Self Employed Training Consultant | LM/C | ESW | Cohabiting |
| 24 | 25-35 | Lecturer | LM/C | ESW | Cohabiting |
| 25 | Over 40 | Events Manager | LM/C | ESW | With partner |
| 26 | 25-35 | Careers Advisor | LM/C | ESW | Lives alone |
| 27 | Over 40 | Lecturer | LM/C | ESW | Lives with partner |
| 28 | 35-40 | Helpline Advisor | LM/C | ESW | Lives alone –planning to live with partner |
| 29 | 38 | Youth Worker | LM/C | ESW | Married Disabled Baby via surrogate (Her partners sperm surrogates egg) |

Making of Modern Motherhood Case Study Sample

| Families (Pseudonyms) | Data | Notes |
|--|-----------------------------------|--|
| Calder Mum (b1972) Gran (b 1940) Friend (b approx 1967) | M1, M2 G1 SO1 | Upper Middle Class White Married Career. (senior medical profession) City <i>Dual earner/ marketised carer</i> |
| Fortune Mum (b1966) Gran (1937) Dad (b.1964) | M1,M2 G1 SO1 | Lower Middle Class White Cohabiting Career (professional public sector) City <i>Female earner/ male pt earner</i> |
| Chapman Mum (b.1978) Gran (b1946) Dad (b. 1974/5) | M1,M2 G1 SO1 | Lower Middle Class, White Australian Married Career (both education) City <i>Male earner/ female carer</i> |
| Woolfe Mum1 (b.1969) Mum2 (b1962) Gran1 (b.1941) Gran2 I (b.1931) | M1, M2 SO1, SO2 G1 G2 | Upper Middle Class White/ Jewish Civil partnership Career (professional) City <i>female carer</i> Upper Middle Class White Civil partnership Adopted Career (professional) <i>Female earner</i> |

| Families (Pseudonyms) | Data | Notes |
|--|----------------------|---|
| Hales Mum (b.1984) Sister (b.1985/6) Gran (b.1964) | M1, M2 SO1 G1 | Working Class Black Caribbean Chain Migration Career (catering /child care) City <i>Female earner and female carer(s) (extended family childcare)</i> |
| Sezgin Mum (b.1981) Dad (b.1983) Gran(b.1958) | M1, M2 SO1 G1 | Working Class Turkish Married Career (service industry) City <i>Female earner/ male part -time (extended family childcare)</i> |
| Arben Mum (b. 1979) Dad (b. 1961/2) Neighbour (b.1955) | M1, M2 SO1 SO1 | Working Class Married Mixed couple (Eastern Europe/ Carriibbean) Unemployed City <i>Male earner/ female carer</i> |
| Shaw Mum (1986) Friend (b.1984) Gran (b1950) | M1, M2 SO1 G1 | Working Class White Single Student City <i>Female care/ extended family childcare support</i> |

| Families (Pseudonyms) | Data | Notes |
|---|----------------------|--|
| Rickards Mum (b1972) Friend (b1967) Gran (b1947) | M1, M2 SO1 G1 | Lower Middle Class White Married Career (professional education) New town <i>Male earner/ female part time, Nursery Childcare</i> |
| Wagland Mum (b1969) Gran (b1945) Great Gran (b1922) | M1, M2 G1 G2 | Lower Middle Class White Married Career (management) New Town <i>Dual earner. Nursery Childcare</i> |
| West Mum (b1956) Dad (b approx 1963) Sister (b approx 1955) | M1, M2 SO1 SO2 | Lower Middle Class White Married Career (Self employed/ public sector) New Town <i>Male Earner/ Female Carer</i> |
| Thompson Mum (b.1989) Gran (b1966) Great Gran (1946) | M1 G1 G2 | Working Class White South African Migration Single Student New town <i>Family childcare</i> |

