

Research Briefing Nº 34

Becoming a mother: a research synthesis of women's experiences

of first-time motherhood

The aim of this systematic review was to collect and analyse research studies examining women's experiences of having their first child.

Key words: motherhood; transition; research synthesis

Key findings

The findings from this review will be of interest to practitioners, researchers, policy-makers, and childbearing women.



- A total of 13,404 references were located through searching; of these, 125 included studies, mostly
 conducted in the USA, UK and Ireland, informed the map. Most reports examined mental health,
 employment/education and teenage motherhood; only 2% of studies examined older motherhood.
- A second search and screening of UK-specific research from all located references identified 60 studies. Over half of these focused on maternal identity, mental health and maternity care.
- Demographic data, including age, place of residence, educational levels and occupational class, were reported sparsely across studies. Over time, greater proportions of diverse and increasingly educated women took part in research.
- Five high-quality sociological studies focused specifically on the issue of women's identity in the transition to motherhood elicited 183 views from women participants on a range of key social and health influences.
- Paid employment and health care experiences were most often described; these were synthesised thematically and these themes appeared consistently over the past thirty years.
- Women comment that once pregnant, their relationships with employers and co-workers changed. On return to work, they were clear about their needs in relation to balancing work and home roles.
- They note a changing sense of connection with their local communities, including a change in their perception to time, and their relationship to it, once they stepped back from paid employment to focus on motherhood.
- In terms of health care, women in more recent studies describe clear needs in their relationships with health care providers and the system in which care occurs.
- Women highlight the importance of choice, control, and clear, respectful communication in trying to navigate the childbearing year.
- Many women describe being ill-prepared antenatally and postnatally for the sheer power of birth, especially when it did not happen the way they were led to believe it would.



1

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What we did

The birth of a first child is an important change for women and for families. The aim of this systematic review was to collect and analyse research studies examining women's experiences of having their first child by asking:

- What research has been undertaken that studies the influences, identified by women, which affect them in becoming a mother?
- To what extent have these influences changed since the 1970s?
- How do different social and health factors influence women's experiences of the transition to motherhood?
- What does a synthesis of such studies contribute to the evolving methodology of systematic reviews in the social sciences?
- What kinds of samples and methods characterise transition to motherhood research, and how trustworthy is the evidence base?

The review was carried out by the Institute of Education's Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI-Centre) in 2011 with funding from the Economic and Social Research Council (ESRC).

How we did it

We prioritised studies that directly reported data on women's experiences focused on identity. The review followed the standard procedures developed by the EPPI-Centre and other research groups for undertaking systematic reviews of research. Following the standard systematic review model, our review consisted of a number of stages:

- specification of the inclusion criteria to be used for locating relevant research literature (reporting primary research; focusing on first-time motherhood; describing women's experiences, perceptions or ideas relating to the transition to motherhood; published in English between 1975 and 2009);
- literature searches of several multidisciplinary electronic databases, conference proceedings, personal contacts and reference citation chasing;
- key-wording ('coding') of relevant located literature;
- a descriptive 'map' of the literature, developed from a 10% random sample of the located references plus key studies suggested by the Advisory Group; and
- an in-depth review of a subset of the research addressing specific research questions based on previously developed EPPI-Centre quality assessment and data extraction tools and analysed using thematic synthesis methods.

Implications

- For clarity and transferability, researchers need to design, measure and report on age (range and mean), socioeconomic class, and ethnicity.
- There is a need to further examine the transition to older mothers, first versus subsequent mothers, and diverse groups of women.
- Midwives and doctors need to respect women's accounts of their expectations and needs and provide women with clear, individualised explanations of risks, incidence rates and outcomes in first births, based on sound epidemiological evidence of physiological birth in low-risk women.
- Across studies and over decades, Caesarean section was not considered more influential than
 instrumental interventions in women's experiences. Rather, it was how health professionals intervened
 in what women expected to be a self-directed process that had an impact on their transition to
 motherhood.
- In becoming mothers, women recognise the need to develop and maintain strong support networks with partners, family, friends and access to health professionals in their local communities.

For the full report see <u>Becoming a mother: A research synthesis of women's views on the experience of first time motherhood (pdf 1mb)</u>

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