ATHABASCA UNIVERSITY

A NARRATIVE INQUIRY INTO BECOMING A MOTHER LATER IN LIFE

BY

CLARE H. FEWSTER

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DEDICATION
This project is dedicated to my entire family. With their unconditional love, support, and patience, the completion of this project came to fruition. My husband, Mark, thank-you for enjoying many weekends playing with our children and keeping the house together. Thank-you Cameron and Neven, my bright smiling boys, for patiently accepting the statement, “Mom is going to do schoolwork today.” Thank-you mum and dad, Phil and Marilyn Wilson, for teaching me to believe in myself and to persevere. And to both my parents and my parent-in-laws, Jack and Joanne Fewster, thank-you for embracing grandparenthood and making my children’s lives special. Thank-you to all my friends for listening on both the good and bad days and for being willing to hang out with my kids. It is because I am a mother, a wife, a daughter, and a friend that this project was important to me. This is also dedicated to all the mothers who do their best everyday; you are the reason I did this.
The members of Clare Fewster’s final project committee are:

<table>
<thead>
<tr>
<th>Name of Supervisor</th>
<th>Name of Second Reader</th>
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<tbody>
<tr>
<td>Dr. Simon Nuttgen</td>
<td>Dr. Gina Wong-Wylie</td>
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ABSTRACT
Narrative inquiry was used to explore the lived experiences of four women who became first-time mothers after 35-years-old. Through narrative analysis of the interview data, five narrative threads (Clandinin & Connelly, 2000) were identified: stories of should and shouldn’t, readiness, the mom stereotype, identity confusion, and something new. Results indicated that participants at times felt caught between the pervading good mothering ideology and their actual experiences upon having a child or children. The discrepancy between their expectations of motherhood and what actually transpired led to feelings of tension and dissonance. Identity confusion was present in all participant narratives; however, through time this confusion gave way to experiences of identity integration. This research has implications for practitioners, academics, and mothers, who through reading this project will gain a deeper understanding of the experience of women who have children later in life and the impact of the good mother ideology on mothers.
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Dr. Simon Nuttgens has aided me in completing this project in innumerable ways. His insightful advice, incredible patience, and gentle support have been greatly appreciated. I thank you. I would also like to thank my friend and colleague, Emily Doyle, for spending many hours reading my project and providing much needed encouragement. Finally, thank-you to Dr. Gina Wong-Wylie for taking the time and energy to be my second reader.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title Page</td>
<td>i</td>
</tr>
<tr>
<td>Dedication</td>
<td>ii</td>
</tr>
<tr>
<td>Committee Members</td>
<td>iii</td>
</tr>
<tr>
<td>Abstract</td>
<td>iv</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>v</td>
</tr>
<tr>
<td>Table of Contents</td>
<td>vi</td>
</tr>
<tr>
<td><strong>CHAPTER I</strong></td>
<td></td>
</tr>
<tr>
<td>Introduction</td>
<td>9</td>
</tr>
<tr>
<td> My Story</td>
<td>9</td>
</tr>
<tr>
<td> Background and Rationale</td>
<td>12</td>
</tr>
<tr>
<td> Research Question</td>
<td>14</td>
</tr>
<tr>
<td><strong>CHAPTER II</strong></td>
<td></td>
</tr>
<tr>
<td>Literature Review</td>
<td>15</td>
</tr>
<tr>
<td> Motherhood-Mothering</td>
<td>15</td>
</tr>
<tr>
<td> Later-age Motherhood</td>
<td>17</td>
</tr>
<tr>
<td> The Dominant Good Mothering Ideology</td>
<td>23</td>
</tr>
<tr>
<td> Transition and Motherhood</td>
<td>28</td>
</tr>
<tr>
<td> Mothering Identity</td>
<td>29</td>
</tr>
<tr>
<td> Erikson’s Stage Theory</td>
<td>29</td>
</tr>
<tr>
<td> Narrative Identity</td>
<td>31</td>
</tr>
<tr>
<td> Mothering Identity Research</td>
<td>33</td>
</tr>
<tr>
<td> Purpose of the Research</td>
<td>36</td>
</tr>
</tbody>
</table>
CHAPTER III

Methodology

Narrative Inquiry

Participant

Story Collection

Narrative Analysis

Trustworthiness and Validity

Ethical Care of Participants

CHAPTER IV

Grace’s Story

Stories of Readiness

Stories of Transition

Stories of The New Normal

Marie’s Story

Stories of Readiness

Stories of Transition

Stories of The New Normal

Cassandra’s Story

Stories of Readiness

Stories of Transition

Stories of The New Normal

Olivia’s Story
Stories of Readiness  
81
Stories of Transition  
82
Stories of The New Normal  
88

CHAPTER V  
92
Discussion  
92
Stories of Should and Shouldn’t  
92
Stories of Readiness  
96
Stories of Mother Stereotype  
98
Stories of Identity Confusion  
101
Stories of Something New  
106
Practical Implications  
110
Limitation of the Research  
111
Future Research  
113
Personal Reflections  
115
References  
116
APPENDIX A  
125
CHAPTER I

Introduction

My Story

Although I did not have children until my early 30’s, my story of motherhood began as a teenager. I enjoyed playing with children, babysat, volunteered at local parks, and worked with children to help support my university education. I was often told that I was going to be a good mother. Although such statements were difficult to grasp as an adolescent, they resonated with me as I knew I wanted to be a good mother. I was looking forward to raising children. I believed that I embodied good values and beliefs and that I had the ability to raise children to become wonderful human beings.

My mother and other important women in my life held the belief that women could be anything they wished in life. Through their role modeling I adopted the belief and I felt strongly about choosing to be an independent woman. As much as I wanted to have children at some point in my life, I had always anticipated following the path of education, career, marrying, and then children. I am not sure how life would have changed if I met my husband earlier, but as it was, I was 31 before we started trying to have our children. I do not recall purposely postponing motherhood or if circumstances led me to the right moment. Regardless, prior to having children I was an independent woman, with an exciting career, and a life that was filled with travel and hobbies. I had developed a strong sense self and enjoyed a relatively carefree existence.

It took me longer to become pregnant than I had anticipated; this led to fears fed by media and society that I might not be able to have children. In the end, it took me two years to become pregnant. Once pregnant, I was annoyed that I could not be a pregnant woman who embraced all the discomforts of my pregnancy. The physical discomforts were frustrating;
however, the contradicting emotions that I felt were more difficult. I was “supposed” to be thrilled, but at times, was not. My issues with my physical size were exacerbated as I gained excess weight throughout my pregnancy. I was resentful towards the petite pregnant women who had a little basketball belly. I certainly could not share my distress, because everyone would think I was depressed or not a “good mother”, or so I thought. Certainly there were times when I experienced excitement; however, in the work place I felt I had to contain the excitement for fear of my clients perceiving it as a lack of commitment. It all felt a little strange, like I couldn’t really be myself.

I returned to part-time work when my first son was two months, usually bringing him with me. At 10 months we hired an in-house occasional childcare provider and at 16 months he went to a day home. I experienced contradictory feelings of sadness and immense guilt leaving him and excitement about my return to work. I even felt guilty that I was excited. I rationalized my decision to make it easier on me. I told myself that he would be socialized, that it would be good for him to be cared for by others, and that work would make me a better mother. At the time, I am ashamed to admit that I felt slightly annoyed when women chose to be stay-at-home mothers. I believed that women could do anything they wanted and should have the drive and commitment, much like men, to be able to work and build a career to be more than “just moms”. Now I realize that although we can still do anything we want, many things are more difficult as a mother. I still, to this day, am conflicted by this realization.

Our first son turned 2-years-old at the same time our second son was born. Staying home with them has given me the opportunity to raise, teach, discipline, and love them all day long (except when I had to find childcare to write this research project – which I still feel guilty about). There were often moments of frustration, anxiety, and questioning my abilities and
choices as a mother when they would not sleep well, did not listen, or had difficulty with potty training. There were times when I would resent having to cook meals, not shower for a day, or clean up yet again. However, for the first year of my second child’s life (my 3rd year of mothering), the fulfillment of being at home fully outweighed the negative experiences.

At some point, near the end of this year, when my children were 1 and 3 years-old, I began to have more difficulty being a stay-at-home mother. I started to experience a lack of confidence in social settings. It seemed to me that I had nothing to contribute to conversations. I was lonely and felt isolated from the outside world. The negative emotions of resentment, loss, and dissonance became increasingly familiar and annoying. I felt my career was slipping away, while my husband’s was growing. But, we had chosen this. I had lived 34 years of my life. I should be sacrificing for my children. I didn’t feel I deserved to have negative feelings about any aspect of being a mother or having children. I felt guilty, selfish, and bad about feeling bad. At times, I was bitter that I was a “homemaker” and consciously fought against being labeled one. The loneliness was surprising for a social person like me. I had very little adult interaction that wasn’t consumed with baby talk. I resisted developing new friendships that were only based on children as a commonality.

I had spent 35 years developing my sense of self, my identity. I was sure of who I was, how I emoted, and my reactions to the world. My sense of who I was as a person began to erode because so much of what I was going through, was foreign to me. I had lost myself. I also developed the perception that I could not and should not share my feelings because when I did I felt like people would not relate. I felt ashamed and embarrassed to share them for fear of judgment. I felt alone.
This is where the project started. My curiosity about other women’s experiences arose partly to validate my own, but mostly to give voice to the unique stories of women who have children at a later age.

**Background and Rationale**

For this project I used narrative inquiry to collect and tell the stories of women who became mothers at a later age. According to Statistics Canada, in 2007 almost 49% of babies were born to mothers over the age of 30 years. This has almost doubled from 1985 when 27.7 % of births were to women aged 30 years and over. Thus, women today are becoming mothers much later than their mothers. Research suggests that women have been choosing to delay motherhood over the past 20 years for various reasons. Dion (1995) identified values of self-reliance, individual development, personal growth, and freedom in women who delayed motherhood. For these women, delaying motherhood resulted in feelings of psychological, financial, and emotional maturity, and stability to assist in their ability to raise children. Schlesinger and Schlesinger (1989) postulated that women delayed having children for educational attainment, financial stability, and career development. Although these reasons for delaying motherhood appear to be positive, Dion argued that the expectations of mothers to be able to handle the transition to motherhood might also be a source of stress for first time mothers.

Becoming a mother brings major changes in a woman’s life psychologically, socially, physiologically, financially, and spiritually (Miller, 2005; Nicolson, 1999). Nicolson identified a variety of losses woman may experience during their transition to motherhood. These losses include loss of worker identity, physical appearance, independence, and relationships with significant others. Depending on the situation, a mother may choose to remove herself from her career for an undetermined amount of time, which may impact her occupational identity and
career goals. For the first time in her life she may start to question her gendered roles along with her physical, intellectual, financial, social, and mothering identities. A woman may feel the need to spend time exploring values, beliefs, and attitudes about who she was and who she has become since becoming a mother (Nicolson, 1999). These perceived losses and struggles have led researchers to begin to explore identity integration and transformation during the transition to motherhood (Maher, 2005; Shelton & Johnson, 2006; Smith, 1994, 1999).

Through the use of narrative inquiry, I will present the stories of four women who became mothers at a later age. For the purpose of this project, the term “later age” will be used and is defined as women who are older than 31 years of age. According to Statistics Canada (Drolet, 2003), delayed motherhood is defined as women who give birth to their first child at least one full year after the predicted age for having children. This definition of later-age is in keeping with existing research that addresses delayed and older mothers (Dion, 1995; Reece, 1995; Shelton & Johnson, 2006).

While previous literature has examined women’s experiences of transitioning to motherhood, few studies have focused on the lived experiences of women who have children at a later age (Shelton & Johnson, 2006). Dion (1995) suggested that women who have children at a later age may feel more mature and psychologically prepared to have children. However, these same women may have more difficulty with the transition if they have placed unreasonable expectations on themselves. The findings of the present research will help provide a more complete account of the experience of women who become mothers at a later age.

Narrative inquiry will be used for this project as a means to explore the diversity and uniqueness in each participant’s journey of becoming a mother. Through collecting narratives of women who become mothers older than 31-years of age, it is also hoped that this research will
give voice to these women’s stories outside of the dominant social discourse regarding what it means to be a *good mother* (Arendell, 2000), White, stay-at-home mothers, who are fulfilled with all aspects of motherhood (Boris, 1994). This research is important to the topic of later-age motherhood as it is becoming more accepted and common to become a mother after developing a strong personal, career, financial, emotional, and social identity.

It is also hoped that telling stories of later-age motherhood will foster connections among women of similar experiences. Oliver (1999) believes that a key feature of stories is their ability to bring together individuals who might otherwise experience a sense of isolation or marginalization. This research tells the stories of women’s changing lives as they become mothers, and even though their stories are unique, it is my belief that other woman will connect and feel validated by these experiences. Regardless of the outcomes of this project, I believe that by sharing the women’s stories, other later-aged women will have an opportunity to identify with the narratives and learn about later-age mothering. It is my hope that this project will be helpful and meaningful to any reader, be they women in the general population, academics, or practitioners who work with women’s issues.

*Research Question*

The research question for this project is as follows: What is the storied experience of women who become mothers at a later-age?

This project consists of five components. Following this introduction, Chapter II provides a review of the theoretical, conceptual, and applied research pertinent to later age motherhood. Chapter III describes the methodological procedures that were used for the narrative inquiry; Chapter IV presents the data as individual stories for each woman; and Chapter V details a discussion of the common themes, implications, and limitations of the research.
Chapter II

Literature Review

The present research is an inquiry into the lived experience of four later-age women’s transition to motherhood. In this literature review I begin with an examination of motherhood-mothering as increasingly important topics of research. Following this I discuss research that focuses specifically on later-age motherhood, which is then followed by discussion of the dominant mothering ideology. In the final sections I present literature on the transition into motherhood and mothering identity.

Motherhood - Mothering

Over the past 30 years, there has been a growing interest in mothering research, which has resulted in a plethora of literature focused on various aspects of mothering (Arendell, 2000, Miller, 2005). Self-help books advise women on how to maintain their identity as mothers (Trudeau, 2008); child-rearing resources provide strategies and skills to help develop our children; and other books highlight the realities, challenges, and expectations of motherhood (Howard, 2008). However, it is unclear if this literature helps women in their transition to motherhood, or if it perpetuates the good mother ideology, which might end up being unhelpful.

Although academic publications on motherhood have grown considerably, mothering and motherhood research have only gained credibility within the field of Women’s Studies, leaving it in the margins of many other disciplines (O’Reilly, 2008). The extensive literature and interest in mothering research has led to creation of research associations, such as The Association for the Research on Mothering at York University in 1998. This association has recently been launched as the Motherhood Institute for Research and Community Involvement (MIRCI). The development of this organization, and the subsequent formation of the Journal of the Association
for Research on Mothering and annual conference, have given researchers direct avenues to publish and disseminate scholarship in the areas of motherhood and mothering. Despite this, some areas of motherhood-mothering have received limited examination (Arendell, 2000).

Researchers in the 1980s and 1990s wrote books about the contradictions of motherhood (Hays, 1996), the differences between working class and middle class mothers (McMahon, 1995), and the differences between young and older first-time mothers (Mercer, 1986). Currently, researchers and non-academics continue to publish literature on the lives of mothers. Notable examples include works such as the lived experiences of mothers and the ideological good mother in *Motherhood Matters: Motherhood as Discourse and Practice* (O’Reilly, 2004); a humorous take on how to challenge the good mothering discourse in *Confessions of a Slacker Mom* (Mead-Ferro, 2004); and an in-depth qualitative project sharing the lived experiences of new mothers (Miller, 2005). Over the past 15 years, motherhood literature has included topics such as the transition into motherhood, identities of mothers, the ideological good mother, intensive mothering, challenges of motherhood, and untold truths about motherhood (Arendell, 2000; Bailey, 1999; Hays, 1996; Johnson & Swanson, 2007; Miller, 2005; Ruble, et al., 1990; Shelton & Johnson, 2006; Smith, 1994, 1999; Weaver & Ussher, 1997). This literature serves to provide a deeper understanding of motherhood in the postmodern society, to shed insight into the lives of mothers and the world of motherhood, to give women a voice to the experience of motherhood, and to provide women with resources to assist in their mothering.

With this abundance of information, it might seem mothers should easily navigate their entry into motherhood. However, as Miller (2005) stated in her narrative research of 17 mothers, “the data reveals how diverse and complex their experiences of becoming mothers were. Even for this apparently homogeneous group, presenting a convincing self as a mother, especially in
the public sphere could be problematic” (p. 24). This research suggests that women experience the transition to mothering in different ways depending on social context, class, religion, beliefs, values, and attitudes.

Although motherhood-mothering research has become increasingly acknowledged and popular in academia, many areas have yet to be examined. This finding is supported by Arendell (2000) who, after reviewing a decade of scholarship, noted that although there have been significant advances in the study of motherhood and mothering, there are areas of research that have yet to be explored in sufficient detail. According to Arendell, there is limited published research focusing on mother identity, how women make meaning of mothering, and the lived experiences and activities of motherhood. Arendell suggested that including demographic shifts that deviate from the trends of earlier decades will complement existing mothering research. Other authors believe that future research should emphasize the importance of hearing the mother’s own voice through the telling of their personal stories (Arendell; Choi, Henshaw, Baker, & Tree, 2005; Shelton & Johnson, 2006).

Later-age Mothers

The inception of the contraceptive pill in the 1960s increased choice about becoming a mother. Prior to this, women in North America were expected to have children, as becoming a mother was understood as a biological drive rather than a personal choice (Letherby, 1994). The changes that occurred during the woman’s liberation movement also gave women greater opportunities and choice in regards to education and employment (Dion, 1995). In general, women have embraced these opportunities through focusing on career, developing independence, and experiencing many aspects of life prior to starting a family. The social changes that have occurred heighten the need to continue examining the similarities and differences between the
experiences of mothers of various ages. A small body of research over the past 30 years has focused on aspects of delayed, postponed, older, or later-age motherhood (Dion, 1995; Garrison, Blalock, Zarski, & Merritt, 1997; Mercer, 1986; Reece, 1995; Schlesinger & Schlesinger, 1989; Shelton & Johnson, 2006). In the section that follows, I present literature that addresses the reasons why some women delay motherhood and research that identifies the transitional impact of having children at a later age.

Through the use of interviews and questionnaires, Mercer (1986) examined the experience of 242 first-time mothers over five postpartum test periods. The women represented three age groups, including teenage mothers 15 to 19 years of age, mothers aged 20 to 29 years, and later-aged mothers 30 to 42-years-old. Mercer found that older mothers had higher education levels and financial resources than the younger samples; however, the older mothers were also the most inexperienced with babies and children. Older mothers felt more isolated from other adults compared to their younger counterparts due to their greater career demands. The older women reported less gratification or satisfaction in parenting than the younger mothers, though were able to manage difficult child behaviours more effectively than the younger mothers. The older group of mothers were three times more likely to be depressed several months postpartum than the youngest mothers in the research. Finally, the older mothers invested more time in preparing for motherhood. Mercer suggested that is it possible that the group of older women had high achievement orientations, which led to mothering situations that did not meet their own expectations.

In a review of several studies of delayed parenthood, Schlesinger and Schlesinger (1989) identified career advancement, worker identity, freedom, stable relationships, and finances as reasons for delaying parenthood. The studies that they reviewed highlighted a greater sense of
control and increased maturity as positive aspects of delaying parenthood. The negative aspects included feelings of unpreparedness, loss of independence, and role conflict after having their children.

The findings of Dion’s (1995) research involving 114 women in their last trimester suggested that women chose to postpone having children to establish stability in various aspects of their personal lives. Through interviews, the participants revealed that they were interested in completing their education, building their careers, engaging in personal growth and well-being, becoming psychologically prepared, and developing a strong relationship with their spouse prior to having children. The women presented family values of self-reliance and individual interests as related factors for delayed child-bearing. The younger women in the study described the physical advantages to early motherhood, while older women described psychological preparedness as an advantage of delaying motherhood. Dion argued that although there appear to be many positive aspects of delayed motherhood, these could also lead to high expectations resulting in difficulty with the transition. Unfortunately, the transition into motherhood once the baby was born was not the focus of this research, leaving the reader with questions about Dion’s interpretation. In addition, although the researchers used individual interviews, the data was combined for generalizability, losing the unique, personal storied lives of the women. Presenting the women’s stories would provide greater insight into to the decisions, values, and expectations of the older women and how these influenced their experiences.

Using questionnaires, Reece (1995) studied the relationship between early maternal experience (self-evaluation of parenting, centrality, and life change) and variables of late transition (stress and maternal adaptation) 1 year postpartum of 105 first-time mothers who had children after 35-years of age. At 1 and 3 months after delivery, questionnaires pertaining to the
mother’s perspectives on being a parent of an infant were administered. The participants completed questionnaires that measured their perceived stress and maternal adaptation at 1 year postpartum. Reece found a moderate correlation between the perceptions of life change at 1 month after delivery and stress at 1 year postpartum. Those women who perceived a high level of change 1 month after delivery scored higher in their level of stress postpartum 1 year after delivery. Reece identified the following dimensions of maternal adaptation as related to global perceived stress: quality of relationship with husband, gratification with delivery, satisfaction with life and life circumstances, confidence in motherhood, satisfaction with infant and infant care tasks, and support for the parental role. The scores of global perceived stress of the older mothers in Reece’s study exceeded the scores of other studies that examined global perceived stress suggesting that “older primiparas in this study were experiencing high levels of global perceived stress 1 year after the birth of their babies” (p. 64). Although over 100 women participated in the study, the women only completed questionnaires; the addition of interview data would have provided deeper understanding of their unique personal situations.

McMahon, (1995) in her book titled, *Engendering Motherhood: Identity and Self-Transformation in Women’s Lives*, shared the unique stories of 59 mothers working full-time from two diverse social classes as they transitioned into motherhood. To attain homogeneity within her sample, McMahon’s included full-time employed mothers of preschoolers. At the time of the interviews (1989) the average age of the working-class mothers was 27-years-old, whereas the average age of the middle class mothers was 35-years-old. Although later-age motherhood was not the focus of McMahon’s project, her findings highlighted various differences and similarities between younger and older mothers. A finding of particular interest was that the younger working-class women perceived that having children resulted in fewer
personal sacrifices compared to the middle-class women. Although the middle-class women acknowledged changes in their lives since having children, they rarely interpreted such changes as negative; rather, these mothers believed that being self-sacrificing, loving, and caring made them better human beings. This qualitative research was path-breaking as it provided a voice to the stories of women as they renegotiated identities during their transition into motherhood. Previously, quantitative methods had dominated mothering research.

Mirowsky and Ross (2002) examined the correlation between depression in adults and the age at which one first becomes a parent. Using data compiled by the National Aging, Status and the Sense of Control survey in 1995, it was found that the optimal age for first birth is approximately 30 years of age for women, taking into consideration emotional and physical health consequences. However, in relation to predicted depression, “parenthood appears to be less detrimental to the emotional well-being of the mothers who became parents in their mid-20’s – mid-30’s (p. 1289). Mirowsky and Ross suggested that as older women have had longer to experience individual freedom and independence, they might feel isolated and trapped when they become mothers. In contrast to the experience of women, there appeared to be no emotional detriment to men who delayed fatherhood. It is important to note that 9 out of 10 of the mothers had their children before the optimal age of 30, thus women who delayed motherhood until after age 30 were not well represented in this research.

Carolan (2005) conducted a qualitative study of 22 Australian first-time mothers aged 35 to 48-years-old consisting of four data collection point throughout the first eight months post partum. Although this nursing research was intended to provide a deeper understanding of these women’s experiences in order to ensure adequate care for later-aged mothers, it nonetheless shed light on various challenges that this demographic of mothers experience. The researcher
identified five sequential temporal stages expressed by the participants. During the conception and postpartum stage, the experience of becoming pregnant and being pregnant was “the project” (p. 769). At 1-4 weeks post partum, the women expressed anxiety of early mothering. The third stage, 1-4 months post partum, involved feelings of struggle and ambivalence. During the fourth stage, 4-6 months post partum, the women indicated that they were figuring things out, realizing that it was okay to not be perfect, and that negative emotions were normal. It was not until 6-8 months post partum that the women expressed finally “feeling like a mother” (p. 778). This study adds considerable information about the anxieties and challenges the later-age women face in regards to caring for their infant; however, it does not speak to the identity transformation that might also be challenging for these women.

In a more recent narrative inquiry, Shelton and Johnson’s (2006) research supported Dion’s (1995) argument that older mothers may experience greater difficulty than anticipated with the transition to becoming a mother. Through their in-depth and unstructured interviews with five older mothers, they found that participants experienced a disruption and challenge to their sense of self through their transition into motherhood. Four out of the five participants interviewed described various losses including identity, confidence, spontaneity, independence, individuality, and connections with others. The women also described experiencing an inner conflict with the contradictory emotions and the tension of perceived outside expectations of being a good mother. However, it is important to note that although the women’s narratives focused on the negative, each of the women described a progression from a loss of identity to an integrated maternal identity through growth and appreciation of the changes that occurred in their lives.
To summarize, little qualitative research exists that focuses on the storied lives of mothers who have children at a later age. Most of what has been written addresses the experiences of mothers in the United Kingdom (Shelton & Johnson, 2006), limiting the generalizability to women in other geographic and cultural contexts. The available research suggests that women who delay motherhood may have unanticipated challenges in their transition to motherhood creating negative emotions (Dion, 1995; Mirowsky & Ross, 2002).

**The Dominant Good Mothering Ideology**

Ideologies are constructed through ideas, values, opinions, and patterns of belief, which are then used to create meaning (Freeden, 2003). They are “produced through the events, actions and images that we create, and we consume packaged meanings that are perpetuated by societal groups to makes sense of the seemingly random behaviours, beliefs, values, and identities that we claim and perform” (Johnston & Swanson, 2006, p. 509). Ideologies shift over time and are subject to cultural differences, political and public change, and economic demands (Miller, 2005). Humans are often unaware of the extent to which ideologies are internalized, even though ideologies are used to characterize, judge, and define ourselves and others (Althusser, 1984).

In 1994, Boris defined a *good mother* as a woman who stayed home full-time, was White, middle class, and most importantly, embraced and found complete fulfillment from the domestic duties and mothering activities. Miller (2005) recognized that the *good mother*, as defined by Boris, is situated among privileged, White women, and is not relevant to less privileged women, resulting in a dominant ideology (Hays, 1996). Yet, this ideology is not even a reality for these White middle-class women. Popular media depicts motherhood in terms of joy, fulfillment, and an innate ability to engage in selfless mothering activities. This representation and accompanying expectations perpetuates the ideological *good mother*. 
Hays (1996) furthered the discussion on good mothering by critiquing and deconstructing the *intensive mothering* ideology. She defined intensive mothering as methods of appropriate child-rearing that are “constructed as child-centred, expert-guided, emotionally absorbing, labor-intensive, and financially expensive” (p. 8). In addition, she asserted that mothers are the primary care-givers, nurturing their child’s development and sacrificing their own needs for the needs of the children. Johnston and Swanson (2006) identified Hays’ work as the dominant mothering ideology of Western culture; however, this ideology does not match the values, beliefs, and attitudes of all women.

As a result of the feminist movement, women have greater choice and opportunity in education, career, and the ability to engage in activities previously dominated by men (McMahon, 1995). Choices present themselves regarding aspects of child-rearing, worker-mother identities, and individual values. Yet, some women may feel that the available choices are incompatible with societal values regarding what it means to be a *good mother* (Weaver & Ussher, 1997).

The dominant *good mothering* ideology has been constructed through longstanding cultural beliefs, images portrayed in popular media, and values that have been explicitly or implicitly implied to women (Johnston & Swanson, 2006). This ideology has led women to engage in behaviours, adopt values, and search for fulfillment in domestic aspirations in order to be a *good mother* and live up to Western society’s dominant mothering discourse. These mothers often develop unrealistic expectations that are not met once they are engaged in the realities of motherhood, which can then result in conflict and negative emotions (Johnston & Swanson; Knaak, 2009). Such emotions can be difficult for women to integrate and accept due to
ideological beliefs that certain negative emotions, such as unhappiness and loss, are considered unnatural for a mother to experience (Marshall, 1991).

According to the dominant mothering ideology, women are expected to selflessly care for their children (Woollett & Marshall, 2000). Women who are challenged by this role or have difficulty with the transition into this role are placed in a position that questions their own mothering when compared to the dictates of the dominant good mother discourse. Mothers who experience or express their struggles or negative feelings may feel guilty and fear being judged for not conforming to the good mother ideology (Marshall, 1991). Personal values are challenged creating difficulty in making decisions that prior to children would have come easily (Choi et al., 2005; Guendouzi, 2005; Shelton & Johnson, 2006). The dissonance experienced when a woman’s actual experiences as mother do not fit with the dominant mothering discourse can lead to the type of psychological discomfort noted by Festinger’s (1957) in his classic work on cognitive dissonance.

According to Guendouzi (2005), the strength of the dominant mothering ideology leads some mothers to engage in good mothering activities in social situations in order to identify themselves as good mothers. Guendouzi stated that, “although the image of the traditional stay-at-home mom may be changing, the social icon of the good mother is still a strong motivator for women’s social behaviors and it is an identity that mothers discursively invoke in all-female interactions” (p. 19). Through her analysis of the ethnographic interviews of mothers, Guendouzi identified characteristics of a good mother as protective, nurturing, caring, socializing, proud, and organized. While examining the same mothers’ everyday interactions and conversation at a schoolyard, Guendouzi found that mothers typically shared stories, emotions, and behaviours that aligned themselves with the characteristics of a good mother.
Johnston and Swanson (2006) suggested that cultural changes and shifts in employment expectations of women led to competing mothering ideologies; however, these authors remarked that intensive mothering expectations remain dominant. Through interviews with 95 first-time mothers, Johnston and Swanson explored how mothers construct their worker-identity and intensive mothering ideology. The results of their study suggested that mothers make changes to their intensive mothering expectations as a way to reconcile their work status choices. Part-time working mothers constructed *good mothering* as quality one-on-one interaction with their child, while full-time working mothers constructed their *good mothering* as emotional and psychological accessibility, rather than physical presence. Johnston and Swanson postulated that some women were able to reframe their situations in order to reduce the dialectic tension between their mothering expectations and their work identity. This research highlights the process that women experience in order to shift their expectations, while emphasizing the conflict that mothers experience. The stay-at-home mothers, who defined a *good mother* as someone who was always available to their children, expressed feeling of loneliness, isolation, and impatience with their children. It should be noted that the lack of differentiation between age groups in this study limits the ability to compare and contrast the experiences of mothers of various age groups.

Heisler and Ellis (2008) examined the use of face negotiation, or the image of oneself, to create an identity and communicate a *good mother* image. The research used Goffman’s (1967) theory of facework negotiation in relation to portraying a *good mother* image to others. Heisler and Ellis hypothesized that women would construct and communicate a “mommy face” that would present and “emphasize all the ways in which she reaches (and often surpasses) her own standard in other areas of motherhood” (p. 44). Questionnaires were used to identify women’s
messages and beliefs about motherhood, the behaviours they engaged in when communicating a good mother image, and their need to convey this image. It was found that some mothers felt it necessary to communicate they were good mothers to gain acceptance and approval from others, to reduce guilt - boosting their own belief that they are good mothers, and to mentor other women about mothering. These finding support the idea that some mothers consciously and purposefully portray an image for others and themselves. There may be incongruence between the mother’s own identity and who she is portraying in order to meet cultural expectations and social desirability. Although this is an image that a woman wants to assume in order to be accepted by others, it perpetuates the dominant mothering ideology, thereby reducing the possibility for women to speak honestly about their actual experiences.

Finally, Choi et al. (2005) conducted a qualitative study using semi-structured interviews to understand how mothers account for their experiences in relation to the socially constructed ideology of motherhood. The results demonstrated that when women believed they were not living up to the good mother ideology they would overcompensate for perceived inadequacies by engaging in behaviours that overemphasized positive aspects of motherhood. In doing so, the mothers felt satisfied with their mothering by showing others that they were good mothers.

Scholars have been writing about and researching various aspects of the good mother ideology as it relates to shifts in cultural and career expectations of women (Choi, et al., 2005; Gendouzi, 2005; Johnston & Swanson, 2006). However, there is limited research regarding the dominant mother ideology; although academic publications in this area are scant, their importance in how mothering is conceptualized and addressed in counselling psychology should not be overlooked. What appears to be absent from the literature, however, is how later-aged women interpret and respond to the dominant mothering ideology.
Transition and Motherhood

Some women view becoming a mother as a stressful event characterized by a major transition that involves many changes (Miller, 2005; Nicolson, 1999; Rogan, Shmied, Barclay, Everitt, & Wyllie, 1997). Schlossberg (1984) defined transition as “any event or non-event that results in change in relationships, routines, assumptions, and/or roles within the setting of self, work family, health and/or economics” (p. 43). Bridges (2004) described events and situations that occur in people’s lives as “changes” (p. xii); with the psychological transition to these changes having the greatest impact on an individual. The psychological transitions are “the inner reorientation and self-definition that you have to go through in order to incorporate any of those changes into your life” (p. xii). According to Bridges, there are five categories to consider when understanding the stress associated with major life events. These categories include: loss of relationships, change in home life, personal change, work and financial change, and inner change.

Taking each of the above categories into consideration, some women may experience major transition at the onset of motherhood and perhaps at different times throughout their journey as a mother. When a woman chooses to stay at home with her children and remain out of the work force for an undetermined amount of time, she may lose contact with important relationships that were key to her sense of self. Some women may have created a vision of life as a mother that does not fit with the realities of motherhood, causing increased difficulty with the transition (Knaak, 2009). There are also significant relational and personal changes that can contribute to a period of instability (Ruble et al., 1990), and which may impact women financially, physiologically, psychologically, cognitively, and spiritually (Ashworth & Nobile, 2007; Miller, 2005; Salmela-Aro, Nurmi, Saisto, & Halmesmaki, 2000; Smith, 1999). Women
may view the world differently and experience philosophical or spiritual growth that alters their perception of life (Shelton & Johnson, 2006). Therefore, the one change, as defined by Bridges (2004), of becoming a mother can influence the mother’s entire sense of self. According to Bridges, it is the psychological transition of this change that must be considered.

Miller (2005) wrote that the “transition to motherhood challenges our sense of who we are as identities, and experiences shift and coherent biological narratives become more difficult to construct: becoming a mother changes everything” (p. 49). Every woman will experience, internalize, accept, and interpret these changes through their individual worldview. The next section will address theories of identity and highlight research that examines various aspects of identity as women transition into motherhood.

**Mothering Identity**

Identity development is most recognized by Erikson’s work in the 1950s and 1960s. His theories are popularly cited, and have become part of the common vocabulary of identity theory (Gardiner, 1981). Erikson’s ideas have also been subject to criticism by feminist scholars (Douvan & Adelson, 1966; Gilligan, 1982; Hodgson & Fischer, 1979; Horst, 1995; Josselson, 1987). Since the introduction of Erikson’s identity theory, theorists have presented alternative identity development approaches and theories. Narrative identity was developed by theorists such as Gergen (1991), Pals (2008), Polkinghorne (1988, 1991), and Singer (2004). This section will include a brief description of Erikson’s theory, various critiques from feminist theorists, and the alternative theory of narrative identity development. I will also present research that examines women’s identity through the transition into motherhood.

*Erikson’s stage theory.* According to Erikson (1968), identities are developed through eight psychosocial developmental stages that begin in the early days of life and continue through
until death. Erikson (1964) defined identity as “the ability to experience one’s self as something that has continuity and sameness, and to act accordingly” (p. 42). This definition suggests that there is a degree of continuous movement towards identity construction; however, according to Erikson, the major process of identity development occurs during the adolescent years. It is during these years that the adolescent strives to answer questions such as “who am I?” and “who do I want to become?” The next development stage is adulthood, a time when an individual finds intimacy and becomes a parent. Although Erikson wrote of various differences between men and women, his theory was written mainly in relation to male identity development.

Numerous feminist theorists have criticized Erikson’s stage theory for inaccurately presenting the experiences of women’s identity development (Gilligan, 1982; Hodgson & Fischer, 1979; Josselson, 1987). Soon after Erikson introduced his theory as a framework for identity development, Douvan and Adelson (1966) conducted a study of adolescents in which they identified a substantial difference between boys and girls identity formation. Specifically, the adolescent girls used intimacy as a means to developing their identity, whereas the boys focused more on their individuality at this age. Hodgson and Fisher criticized Erikson for minimizing sex differences and for disregarding how the sex differences might alter the developmental theory. Gilligan claimed that Erikson portrayed women as inferior, feeble, and heavily reliant on men. She agreed with Erikson’s theory that women were more concerned with relatedness than men, but faulted him for not emphasizing women’s experience as distinct. She argued that women rely on relationships and connectedness with others for identity development. Gilligan’s belief was that identity and intimacy tasks are fused as one, rather than separate, as in Erikson’s theory. Morgan and Farber (1982) further critiqued Erikson’s developmental theory,
challenging the notion that women depend on marriage in order to achieve an identity, whereas men address intimacy after attaining self-definition.

Josselson (1987) was one of the first researchers to examine identity development among women in her qualitative study of 60 female college students. Josselson interviewed participants in their senior year and was able to recruit 34 participants for a follow-up interview 10 to 12 years later. Josselson’s findings allowed her to reconceptualize Erikson’s stages that had been associated with male development and tailor them into themes that represent the experiences of women. Erikson has been criticized for neglecting to highlight the sex differences between men and women; however, feminist theorists continues to debate whether these differences should be accentuated or minimized in order to understand female identity development (Bohan, 2002).

The results of this review suggest that Erikson’s identity theory does not accurately represent female identity development. In the section that follows, I present narrative identity theory as an alternative to traditional Eriksonian theory. My belief is that narrative identity is better suited to describing identity development among women.

Narrative identity. Humans lead storied lives (Lieblich, Tuval-Mashiach, & Zilber, 1998) and it is through the narration of these stories that humans conceptualize their self-identity (Polkinghorne, 1991). Various authors who are disenchanted with modernist theories of identity suggest that viewing the self as a narrative captures both the temporal and developmental aspects of human existence (Gergen, 1991; Polkinghorne, 1991). Unlike Erikson’s theory that views identity as formulated predominantly during adolescence, narrative identity takes into consideration the dynamic nature of humans throughout the lifespan (Polkinghorne, 1991).

Polkinghorne (1995), using the terms narrative and story interchangeably, defined stories as “narratives that combine a succession of incidents into a unified episode” (p. 7). Singer (2004)
stated “our ability to construct narratives evolves and changes over all phases of the lifespan, as does our capacity for autobiographical reasoning and the ability to make meaning of the stories to tell” (p. 443). Through the act of narrating personal stories, people make meaning of past events, incorporate them into their present, and then create a future possibility (Polkinghorne, 1995). Polkinghorne (1991) stated the following:

Individuals construct private and personal stories linking diverse events of their lives into unified and understandable wholes. These are the stories of the self. They are the basis of personal identity and self-understanding and they provide answers to the question ‘Who am I?’ (p. 136)

Lieblich et al. (1998) similarly asserted that “the story is one’s identity, a story created, told, revised, and retold throughout life” (p. 8).

Every event, memory, or cognitive process can be identified as part of an operating plot (Polkinghorne, 1991). Individuals come to understand themselves by reflecting on these stories and make sense of who they are by configuring the plots into a whole. Understanding oneself through narrative configuration provides humans with a self-knowledge about how they exist in the world and how they would normally respond emotionally, physically, and cognitively to events (Polkinghorne, 1991). However, human identities are dynamic and the use of narratives to create identities provide human’s the opportunity to incorporate the impact of every social interaction and change in environment into their understanding of their self (Scheibe, 1986). Pals (2006) asserts that “identity in adulthood takes the shape of a coherent narrative or life story that integrates interpretations of the past with the present self and provides life with meaning and purpose” (p. 1080). Singer (2004) uses the term narrative identity processing to refer to the ongoing task of narrating and interpreting past experiences and incorporating them into the life
story as lasting narrative products. Through the creation of unified stories and plots into a whole story, an individual can achieve narrative coherence (Polkinghorne, 1991). However, Polkinghorne suggests that narrative identity is an ongoing task that, at times, can be a struggle when there is disconnectedness, confusion, or fragmentation between the coherent self and lived experience.

**Mothering identity research.** Through interviewing 30 to 33-year-old first-time mothers throughout the first four months after giving birth, Pickens (1982) examined the participants’ description of their process of formulating a mother identity. Pickens found that the participants experienced an identity crisis during the first four months postpartum when they viewed themselves neither as career women nor as mothers. At the same time, there was incongruence between some of the participants’ experiences as mothers and their perceived former attributes. For example, women who had perceived themselves as competent and independent before having children, found themselves in situations where they felt incompetent and dependent since becoming mothers. However, at 4 months postpartum, Pickens found that these women had increased their confidence and experienced less incongruence between their pre- and post-child identity.

Smith (1994) used interview and diary data from four women, between the ages of 25 and 29-years-old, to examine the process of self-reconstruction through their pregnancy with their retrospective accounts five months post partum. A number of reconstructive narratives were identified through examination of the retrospective accounts, including: glossing over difficulties, emphasizing personal growth, and highlighting continuity of self. Of interest is that retrospectively there was a shift from negative stories that were expressed in the real-time interview during pregnancy, to primarily positive accounts post partum. Similarly, in regards to
self-development, the women in the real-time interview during pregnancy described decline or divergence of their self-identity; however, retrospectively the participants indicated that there was growth through the pregnancy.

Smith (1999) examined the same data to highlight identity development during the transition to motherhood. He identified a process of transition that the women experienced through their pregnancies that changed their focus from the public world of work to a more private world of family and friends. Smith suggested that this process assisted in the preparation for the new role and transformation of a women’s life plans post partum. Three of the four participants used positive statements to reflect identity changes through the transition, indicating limited undermining of identity through the transition into motherhood.

Women may start to experience inconsistencies with their previous identities once they become pregnant (Bailey, 1999). In a study of pregnant women, Bailey identified the process of refraction that women experienced once they became pregnant. The women in Bailey’s study suggested that they had not changed fundamentally; however, there was a period of time when their identities were “refracted by the prism of pregnancy, rather than altered fundamentally” (p. 350). These women felt as though pregnancy gave them an opportunity to change their life by excusing them from their previous identities, which in some cases were unsatisfactory. For example, removing themselves from the workforce would provide them with an opportunity to start a new career upon their return. However, some women felt that pregnancy gave them an opportunity to be vulnerable, focus on themselves, and excuse themselves from the workforce.

With the increase in women working after having children, the worker-mother identity has become a topic of interest (Johnston & Swanson, 2006, 2007). Since the feminist movement, there have been significant shifts in expectations of women in regards to education and career.
Women have access to employment opportunities that were once dedicated to males. It can be difficult for women to balance their personal career goals with the traditional mothering ideology (full-time, stay-home mother) (Johnston & Swanson). Research conducted by Johnston and Swanson describes how the worker-mother identity integration can create conflict or a dialectic tension. The dialectic tension occurs when a woman moves closer to her worker identity, creating a stronger pull towards her mothering identity, with the opposite also being true.

Professional women may experience identity and role struggles due to the ideological incompatibilities between career and the more traditional female role of motherhood (Buzzanell, et al., 2005; Martin, 2004). Geundouzi (2005) also identified the dialectic dilemma among women who try to balance their roles as mothers and professionals. Mashung (1989) suggested that women may construct a satisfying identity through their work and career and as a result have difficulty transitioning to a non-career identity. The incompatibility between the worker role and the mother role can lead women to question their identities, roles, values, and priorities. These questions and conflicts may result in overwhelming emotions regarding decisions about childcare, intensive mothering, returning to work, and a mother’s pre-children identity (Shelton & Johnson, 2006).

To summarize, it would seem that one’s identity after becoming a mother is a topic that is limited within the motherhood scholarship. Indeed, Arendell (2000) similarly concluded that in the area of motherhood there is a need to focus research on women’s identities as they become mothers. More specifically, she raised the question, “How does mothering complement or conflict with other identities?” (p. 1201). She also suggested that due to the change in demographics of mothers, there is a need to focus on the lived experiences of older mothers. Since Arendell’s review, only a few studies have addressed the topic of motherhood identity
(Johnston & Swanson, 2007; Maher, 2005), and only one specifically relates to later-aged mothers (Shelton & Johnson, 2006). Although Shelton and Johnson found that becoming a mother later in life after developing a strong sense of self, maturity, financial independence, fulfilling career, and strong relationships, may pose a challenge to one’s previous identity, they asserted that a deeper examination of the identities of women who become mothers later in life is necessary.

**Purpose of the Research**

Over the past 30 years, research that examines the transition into motherhood from a more general perspective is abundant; however, this literature is not suitably generalized to women who become mothers at a later age. This lack of research leaves many questions unanswered. For example, is it possible that Dion’s (1995) suggestions are accurate, that women who delay motherhood may have difficulty with the transition because they have created high expectations of themselves as mothers? Is it possible that later-aged women have developed their knowledge of self to such a degree that any deviation from this identity is uncomfortable and unfamiliar? How does the dominant mothering ideology impact a women’s experience as a mother? The purpose of this project is to bring a deeper understanding to the lived experience of women who become mothers at a later age through the use of in-depth interviews that provide detailed accounts of their lives as they transition into motherhood.
Chapter III
Methodology

_Narrative Inquiry_

For this project, narrative inquiry was chosen to bring greater understanding to the experiences of women who choose to become mother at a later age. Over the 35 or more years prior to becoming mothers, these women have had opportunity in their lives to develop their identity, careers, personal lives, understanding of themselves, and relationships in preparation for having children. Although various qualitative methodologies could have been used for this project, I chose narrative inquiry because it captures and presents participant stories intact.

Qualitative research, “is a kind of personal passion: the satisfaction of a boundless curiosity about the construction of our social worlds” (Warren & Karner, 2010, p. 15). More specifically, it involves the inquiry of a phenomenon from both wholistic and naturalistic perspectives (Denzin & Lincoln, 1994). Narrative inquiry falls within the parameters of qualitative research with the use of stories of human experience and action to understand and make meaning about life (Polkinghorne, 1995). My passion and curiosity is focused on how women experience transition as they engage in the world of mothering. My research question is: What are the lived experiences of women who become mothers at a later age? My hope is that the readers will be engaged with the stories and thus connect with each woman through experiencing their rich storied life.

The ways that humans experience, interact, and understand the world is basic to the study of narrative (Connelly & Clandinin, 1990; Clandinin & Connelly, 2000). Narrative theorists suggest that humans are storytellers by nature, and thus humans live storied lives (Connelly & Clandinin; Lieblich, et al., 1998; Polkinghorne, 1995). Within this view, stories help individuals
understand and create meaning about their experiences. Savin-Baden and Van Niekerk (2007) state that “the idea of narrative inquiry is that stories are collected as a means of understanding experience as lived and told, through both research and literature” (p. 459). The aim of narrative inquiry is to collect stories of personal experience and then textually present these so that a fuller understanding of the phenomenon being investigated is achieved (Connelly & Clandinin; Polkinghorne).

Personal narratives can be used to develop an individual’s sense of identity (Mischler, 1995) and provide access to people’s identities and personalities (Lieblich, et al., 1998). Narratives provide us with a way to define ourselves through connecting sequences of events which can then be shared with others (Oliver, 1999; Smith, 2008). The current research shares the stories of four later-age women as they transition into motherhood. Even though their stories are unique, it is hoped that other women will be able to understand their stories not through generalization (as in quantitative research), but through analogy, where similar stories resonate within a common experience (Polkinghorne).

**Participants**

The participants for this research included four adult females. My first participant, Grace¹, aged 39 at the time of the interview, is a mother of a 2-year-old girl. Marie, my second participant, was 40-years-old at the time of the interviews. She is a mother of three children, a 3-and-a-half year old boy, and a boy and a girl twin who were 14 months old. Cassandra, aged 40, is a mother of a 2-year-old boy. Finally, Olivia, aged 39, is a mother of two girls, 1 and 4 years of age.

The criteria for participating in this project are as follows:

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¹ Pseudonyms are used for all participants and family members named in the stories.
1) Women who had their first child born at the age of 31² years.

2) Women who have a child or children between the ages of 1 and 4 years.

3) Women who believe that they have developed a career of five years prior to having children.

4) Participants who are able to articulate a rich and thoughtful story of their life as a mother.

The participants for this research were recruited using a purposive sampling strategy. Maxwell (1997) defines purposive sampling as a strategy in which “particular settings, persons, or events are deliberately selected for the important information they can provide that cannot be gotten as well from other choices” (p. 87). Women learned about my project through word of mouth and contacted me directly to receive the detailed research information.

Mothers of children aged 1 to 4 years were selected to increase homogeneity within the group such that all participants were relatively new mothers, yet were past the stage of caring for a newborn. This follows with Nicolson’s (1999) suggestion that there is value in exploring mother’s experiences some time after becoming mothers as they may have more ability to think objectively on their experience.

**Story Collection**

Connelly and Clandinin (1990) describe numerous sources of data collection, including field notes of shared experience, journal records, interviews, story-telling, letter writing, autobiographical, and biographical writing. Digitally recorded interviews were used to collect data for this research. I interviewed each participant twice. Each interview lasted between 45 to 60 minutes. The second interview was used to check the accuracy of the transcription, clarify details of the previous interview, and add to the participants unfolding story. Based on Flick’s (2002) approach termed the episodic interview, four structured questions were used to gather

² Although the criteria for the age of the mothers was at least 31-years-old at the time of first-birth, all of the women were 35 years or older.
interview data. They included: 1) What age did you have your children? 2) Describe the point in your life you remember thinking about wanting to have children? 3) How did you know that you wanted to have children? 4) How does motherhood fit into your sense of self?

The remainder of each interview unfolded through the direction of each woman’s narrative. The focus was on the specific episode of becoming a mother and their subsequent experiences as they transitioned to this new role and identity. The unstructured interview was individually and spontaneously created depending on the details of the story being told. Before commencing the interviews, I provided each participant with details of the project, reviewed the participant criteria, and undertook the informed consent process (see Appendix A).

**Narrative Analysis**

This project was subject to a two-part analysis (Polkinghorne, 1995). The first, the narrative analysis, was the synthesis of each woman’s interview data, thus producing an individual story of the transition into motherhood for each participant. The second part, called the analysis of the narrative was inductive in nature. Rather than imposing previous theoretically derived concepts, I searched for commonalities within the data to produce what Clandinin Connelly (2000) refer to as *narrative threads*, and supported each thread with existing theory and research (Polkinghorne).

To develop a strong and informed analysis process, I drew upon Warren and Karner’s (2010) recommendations, which include: choosing an interesting topic; taking adequate time to gather rich descriptive data; carefully organizing the data; becoming deeply familiar with the data; and taking time to develop meaningful and ethical reconstructions of the participants’ narratives. To further enhance this process, Polkinghorne’s (1995) steps to narrative analysis were used as a guideline. The following steps were implemented for the narrative analysis:
1. Each digitally recorded interview was transcribed verbatim by myself and sent back to the participant for verification.

2. Edits to the transcripts were completed accordingly.

3. Once each transcript was complete, it was read meticulously. Any aspect of the transcript that related to their story of motherhood was underlined.

4. Through this reading, it became apparent that experiences of later motherhood could further be broken down to stories of readiness, transition, and the “new normal”. These three temporal groupings were then used to provide an overarching structure for the participant stories.

5. The transcript was read through a second and third time. Each time, margin notes were made that connected the narrative to the above three groupings and a brief phrase identifying the particular story being told (for example, “the right guy” or “loss of confidence”).

6. Participant stories were constructed by pasting quotes from interviews into a newly created word document. These quotes were placed within the three temporal groupings noted above (readiness, transition and the new normal).

7. The narrative process continued by adding supportive and supplementary text and commentary that resulted in a first, rough draft of the narrative.

8. Numerous edits and revisions resulted in a complete narrative.

9. Each completed narrative was sent to the participant for review and verification of accuracy.

10. Revisions from the participants were completed accordingly.
These steps comprised the first part of the narrative analysis, the result of which was a unique story for each participant based on her narratives of her actions, events, and emotions as she transitioned to motherhood. The second part of the analysis involved identifying common threads (Clandinin & Connelly, 2000) that connected each of the participant’s stories. The following steps were taken to develop these common threads:

1. Each story was read, highlighting important episodes, events, or emotions that related to the participants experience of their transition into motherhood.
2. Each story was then read two additional times, noting possible threads in the margins.
3. Thread headings were created that captured the commonality of the stories. Each thread was given a title prefaced by *Stories of,* and brief descriptions of how each woman’s story fit into that particular thread were developed.
4. Each thread was evaluated, challenged, and edited accordingly. Finally, five threads were determined to best represent the participants’ experience.

*Trustworthiness and Validity*

Validity continues to be an issue in social science research (Polkinghorne, 2007). In 1990, Mishler proposed to “redefine validation as a process through which we make claims for and evaluate the ‘trustworthiness’ of reported observation, interpretations, and generalizations (p. 419). He suggested that a community of researchers could evaluate trustworthiness of a study by their willingness to accept the results and find useful ways to interpret and theorize the data for their individual needs. When a researcher provides detailed information about the study, other researchers can make a “judgment of their trustworthiness and then decide whether or not to depend on them for further work” (p. 438). In addition, a researcher’s investment of time, energy, and reputation into developing qualitative research will help other to evaluate the degree
of trustworthiness. Polkinghorne (2007) added support to Mishler’s views, stating that “the confidence a reader grants to a narrative knowledge claim is a function of cogency and soundness of the evidence-based arguments presented by the narrative researcher (p. 485).”

In order to increase the trustworthiness of a qualitative research report, it is important to address issues of subjectivity and bias. Given that the researcher is the research instrument, the research topics, interview process, data collection, and interpretation are inherently influenced by individual biases and subjective experiences (Lieblich, et al., 1998). For this reason, attempting to reduce bias by facilitating transparency across all facets of the research is critically important. In order to increase transparency within the current research, I shared my personal interest and curiosity to the participants, and included my story of transition into motherhood at the beginning of this project. Acknowledging my bias is integral as it is virtually impossible to detach myself from my own worldview. In addition, I provided each participant with an opportunity to read, clarify, and change any aspect of their interview transcripts and their complete story.

Ethical Care of Participants

Implementing the ethical guidelines for conducting research with human subjects required by Athabasca University Ethical Review Committee provided me with a framework from which to practice appropriate ethical care of the participants. These guidelines include:

1) Ensuring that each participant understood the nature and purpose of the research.
2) Obtaining written informed consent from all participants.
3) Explicitly stating that participants have the right to refuse any questions throughout the interview process or withdraw from the research project at any time without any consequence.
4) Describing the steps taken to ensure confidentiality and anonymity throughout the entire research process.

5) Explaining the potential risks that might be encountered through participation.

In addition to these provisions, it was my goal that participants would feel part of the research and not like a research instrument. In an attempt to level the hierarchy that is often present in social science research, I worked at creating collaborative relationships with the participants (Warren & Karner, 2010). After each transcription was completed, I returned the transcript to the participants, to ensure that the participants had the opportunity to clarify, change, or exclude any aspect and to confirm accuracy. I wanted the participants to feel that I was taking care and concern to interpret their story accurately. Returning the transcripts to participants to review provided the opportunity to connect with the participants to develop an environment of trust. Although none of the participants changed any parts of their stories during their reviews, providing the women with another occasion to review and check the final story was another step taken for continued care of the participants. Lastly, each participant will be provided with a final copy of the entire project upon completion.
CHAPTER IV
Grace’s Story

*Stories of Readiness*

From the time that Grace was an adolescent, she had a desire to have children; however, she did not anticipate becoming a mother until later into adulthood. Growing up she had a strong connection to children and thus came to believe that it was a “natural progression” to have children of her own.

I spent years at a camp for children. It was a sleep-away camp. . . . I just loved being around kids and teaching them, and exploring with them and taking care of them. . . . Just enjoying them and just knowing that I guess a family was something that I wanted in my future.

Completing her post secondary education and traveling was a priority for Grace. She did not want to marry and have children at a young age. As she moved into her mid 20’s and became an artist and a “free thinker”, Grace focused on having fun and self-exploration. After university, Grace moved far away from home to experience a different kind of life style than the densely populated city of her youth.

I just think physically I wouldn’t be ready to have a child in my early 20’s, there was still too much to explore. . . . I was young. I was thinking, ‘I am just in university and I am just discovering life and having a child in my life would just not work.’

When Grace was 30-years-old, she began to think that her “time was ticking”. She observed the intense connection between mother and child when a close friend had a baby. This prompted Grace to give serious thoughts to having a baby of her own. However, this would mean ending an 8-year relationship with someone who did not fit her definition of a father, then finding someone new who did.

With the heightened awareness of the difficulties of later-age motherhood, and the realization that her time to have children was limited, Grace purposefully moved her life in a
direction that was conducive to creating a family. In anticipation of finding a suitable partner and starting a family, Grace became focused on her health. Given her previous health concerns combined with the loss of her mother to lung cancer, Grace decided to alter her lifestyle.

I used to smoke a pack and a half a day, so when I found out she (her mom) had lung cancer I pretty much quit smoking. So that became conscious for me and then I thought hmm, overall healthy, not just quitting smoking, eating healthy.

At 32-years-old, Grace met a new man, Bruce, whom she would eventually marry. When they started dating, it “felt incredibly right”. At that point, Grace had created a solid foundation for her family.

I just knew he was someone that I wanted to spend a long time with. And with that came knowing that I wanted to have a child with him. . . . Stability in a home, in a job, in the relationship was important for sure. . . . It just seemed like all those things were in place.

Both Grace and Bruce were excited about the prospect of having children. Even though Grace had concerns about her ability to become pregnant at age 35, they chose to travel rather than immediately try to become pregnant.

I was approaching 34. I thought, ‘Wow, I am going to be 35 soon. Should we try right away?’ I wasn’t ready to try right away when we were married because we thought we wanted some more time. . . . I thought, ‘Should we start trying now, because it is the right thing to do or should we just wait?’ And we decided to wait for a year because we wanted to do some trips and do some climbing and just I guess, have fun.

When the moment came that they were going to try to become pregnant, Grace was overcome with excitement and nervousness. Both her age and her previous experience with ovarian cysts created concern about her ability to have children.

Complete excitement. . . . But back then I think there was a lot of nervousness for the physical changes and the pregnancy . . . . It is so funny because you spend your whole life, well, not your whole life, but your whole adult life until you want kids, trying not to have them.

Although Grace had anticipated numerous months of trying to become pregnant, she became pregnant after only two months, giving birth to a baby girl, Amanda.
At the time of the interview, Grace had been a mother for just over 2 years. She shamefully admits to developing her own mother stereotype prior to having children. She continues to struggle with this, both in terms of how to articulate it and in terms of how to avoid it.

I guess it is the mom stereotype of just sort of becoming so wrapped up in your child, but just (pause) boring. Mom stereotype. It is so bad. I feel bad talking about it because, I don’t know why. Because it is unfair. Because maybe I don’t quite know what I mean. . . I realize that you can do whatever you want to do and you don’t have to fall into that. What is the mom stereotype? Perhaps you are not as active as you once were. You aren’t concerned about your appearances much, or you aren’t as interested in your friends lives because you now have a child in your life and that might be a huge interest to you.

Through our conversation, Grace struggled to both describe and understand her own depiction of the mother stereotype she had created prior to having children. From her interactions with other women and her perception, she created a view of motherhood that did not fit with her own ideas of being a mother.

I always worried that I would turn into the mom stereotype. I would worry about thinking that I am going to become one: a mother where now my life is my children and just my children. And so I would worry that I would lose myself. I would see my one co-worker and I thought, ‘Oh my god.’ She would tell me what she ate last night and she told me the cute things she said. And I just thought, ‘Is this what mother’s do? Do you turn into one of these people?’ So I was very aware of that.

Grace viewed her life as exciting and interesting prior to having Amanda. This view stands in contrast to the stereotype of a mother that Grace developed before becoming a parent. It was her perception that mothers accepted being unfit and unconcerned about their appearance. Ultimately, Grace’s perception was that these women’s lives had become solely focused on their children and that nothing else mattered; in her view, they had lost themselves. She wanted to have more in her life than just her child. She wanted to be concerned about her appearance without fear of judgment and be able to enjoy her career without having to answer why she
returned to work. Even though Grace had created a vision of herself that was different to these women, she sometimes struggles as she feels she has become “that mom”.

I feel like the same person. I mean, obviously I am a mom, but I remember thinking that I have gone to the other side. I don’t know what it is, like people are going to see me differently. It sounds vain, but they are going to see me as a ‘mom’, which is great, but I remember not having kids thinking, ‘There’s a mom.’

It is just so interesting because you are labeled ‘a mom’ and I would worry people would show up at my house, my hair would be up, the house would be a mess, and I would think, ‘I fit the stereotype. I am that stereotype now, and I don’t want to be that stereotype.’ I struggle with this sometimes.

Making personal decisions about the birthing process, breastfeeding, social networks, and working situation were difficult for Grace as she felt her decisions were not congruent with other women in her community. Grace first experienced this when she chose to have a scheduled caesarean section (C-section). Based on family history with childbirth, both on her father’s and mother’s side, Grace felt strongly that a C-section was the right choice for her.

I had arranged to have a C-section. . . . It is hard to explain to women. I believe in choice and if you want to have a C-section that is your choice. . . . Certainly with the C-section it was very private information and very few people knew because I couldn’t tell people. I just felt like I couldn’t share that. . . . I think because I was worried about being judged. . . . It felt sneaky. . . . That was a bit of a struggle because I wasn’t being completely honest with people. Not that I have to tell them my birthing plan, but it felt kind of, I guess, secretive.

Although Grace was comfortable with her choice to have a C-section, she feels extremely fortunate to have, unexpectedly, given birth naturally.

Grace had trouble with breastfeeding, as her daughter was never able to latch adequately to solely breastfeed. Having adopted the belief that a mother should naturally breastfeed so as to enhance nutrition and bonding time, Grace’s first 6 months as a mother was fraught with guilt and sadness with her inability to breastfeed.

Wanting to and then it just doesn’t happen, that was a lot of pain for me in the first 6 months because I thought I was a mother and I can’t feed her fully from me and that was
hard. . . . For me it made me sad and frustrated, just because that was something that I just really wanted to give her.

Grace’s social experiences during the first 6 months at home with Amanda led to feelings of anxiety, creating questions about her previous self-understanding. Due to feelings of loneliness and the realization that many of her close friends were either working or lived far away, she decided to attend a few organized mom-and-baby groups with friends.

I have some close friends that did some group setting at the beginning. I didn’t love them (the groups). . . . It was just hard. I just thought that maybe I was a little out of place because I didn’t want to go to the playground and talk about Amanda and mom things. It was hard at the beginning. I went to a couple of mother teas when Amanda was first born with a group from my prenatal class and some from a postnatal class. I went to a few of those and I actually just didn’t like them. (pause) I think that it was because, not that it was competitive, but some kids were starting to roll over, and Amanda wasn’t. And so for me, while it was about getting together with moms and kids, I just didn’t want to talk about Amanda. I wanted to talk about books I had read and reviews and I just didn’t like them. It is not that I didn’t like the women, it just, I stopped going to them.

These experiences added to the questions that Grace had of herself as a mother, which in turn produced anxiety about her social identity. Previous to this period of her life, Grace had viewed herself as a confident social individual. However, in parent/child gatherings she felt anxious and awkward. She wondered why she did not want to talk about her daughter and their children. These were unfamiliar and uncomfortable feelings that were difficult for her. Grace began to feel out of place in a world of motherhood where there were so many commonalities. The importance of social situations, such as art shows and book reviews, became apparent to Grace; however, she found it difficult to partake in these activities as a new mother. She was no longer engaging in activities that of which she felt passionate. Instead, she found herself trying to figure out how she fit in with a group of women she did not know very well, the only commonality being their status as new mothers.

But, I felt like I should. And then I started feeling like, ‘What is wrong with me? Because I am actually not getting excited to meet with these people next Wednesday between 11-
2.’ And I was just dreading it and I just stopped going to them because it was this complete anxiety. This was a way to get out of my house and meet with other moms and kids and I just wasn’t wanting to do it at all. And then I thought, ‘Am I antisocial?’

During the months off with Amanda, Grace felt dissonance when considering her role in the home. Much like the stereotype that she came to hold towards motherhood, she had also developed a negative attitude toward domestic duties. Before having Amanda, Grace imagined maternity leave as a period when she would have a lot of time, energy, and freedom to live her life as she wished. This, however, is not how it transpired.

I thought I would have time to do this and this, but realized that for the first three months I was so friggin tired I didn’t want to walk downtown and go to the store. I didn’t want to go to the gym. . . . I just thought, ‘12 months off, maternity leave, that’s awesome. . . . Exciting, freedom all day to do anything - tons of freedom.’ Where was the freedom the first three months, aside from not going to work? I could barely keep the house.

Grace began to feel that she “should” be productive at home while Amanda was sleeping. The constant pressure of the domestic duties challenged her image of what her maternity leave would be like. Although not entirely sure how she developed the pressure to have bathrooms cleaned, laundry finished, or meals on the table, Grace speculated that it has to do with her own experiences growing up.

Probably because my mom didn’t work. . . .It is interesting because my mom never worked and my dad obviously did. I think she ran a house and raised three children and that was work. But I think my dad could have helped more because that is not always fun work. And now that I am in it, I think, hmm. . . . It feels like I should have the bathroom clean or I should . . . . I guess because I am home all day, what should I be doing. I mean if Amanda is sleeping for three hours, I guess I could clean the house, or I could clean the bathroom, or I could put a load of laundry in, because I am not working. I mean, I am not at a job, but I am working at home.

After spending 14 months at home with Amanda, Grace decided to return work to rekindle some of her previous interests. It came as a welcome surprise when her employer offered her a part-time position, as she did not want to work full-time; however, this created another agonizing decision. In a community where many women choose to stay home with their
children, Grace questioned both her motive for going back to work and her ability as a mother. She knew she did not want to stay home full-time, but felt she had to defend her decision to return to work.

I was feeling a kind of pressure, because I wanted to go back to work, but I don’t really have to. I don’t have to go back to work to make ends meet, it helps. Then I feel kind of bad sometimes, thinking, ‘Why am I at work for three day?’ But I want to be at work. And should I want to be working or should I really wanting to be with Amanda, 7 days a week. . . . Because I would think ‘Why don’t I want to be home with Amanda? Am I not a good mom?’

Even though Grace was comfortable with the decision to send Amanda to daycare part-time, she still experienced feelings of guilt. The additional income has assisted in maintaining their quality of life, yet it was not essential. She imagined how her friends, who are stay-at-home mothers, would view her decision. This added to her dilemma about working and increased the feelings of inadequacy within the mothering community.

It was a bit of questioning. But when I returned it felt right and it worked for her, because she is in daycare three days. So it felt better, it has felt better as time goes on. But initially at the beginning, there was I guess, guilt, when I went to take her to daycare and go to work. I don’t really have to be at work. I could be at home with you full time, but I don’t know if I want to be. Feelings of guilt. . . . Guilt because I think, ‘Naturally should I want to be there with my child full time as a mother, so why don’t I want to?’ . . . . I don’t necessarily have to work, but it is my choice and I want to go. Sometimes I just think, ‘How does that look?’ And I don’t let it overwhelm me, but it is just in the back of my mind sometimes. Are others saying, ‘Wow, why doesn’t Grace want to be home? or How could she not want to be with her child full time?’

Prior to having children, Grace was always a fit, athletic woman. Her physical identity was very important to her. She prided herself in her physicality and found it difficult to deal with the physical changes that occurred through pregnancy and since giving birth.

I used to have a rock hard tummy. It is just not there anymore and maybe because I am turning 40 this year, it is never going to come back. . . . I just gained weight that I don’t think will ever come off. So, that was a big struggle for me and I think ‘That is so lame, so just quit it.’ But I still fight with it. I still fight with it because I feel lumpy and I feel like one of those moms in the playground that just doesn’t look after herself.
Seeing other women, who appeared to have their bodies return to pre-pregnancy shape, adds to her feelings of frustration. Grace feels a sense of dissonance because she thinks she “shouldn’t” be struggling with her physical changes and “should” be appreciating the beauty and miracle of how her body provided her with her daughter.

And I think that I will get better with it as the years go on. . . . I think that whereas other women think, ‘Wow, my body has given me this beautiful thing.’ and I appreciated that, but at the same time it sucks. It totally changed my body. So when I try to look at my body and think it is beautiful because it gave me this, I still think damnit (laughing). . . . So that has been hard.

At 37, when Grace had Amanda, her lifestyle included travel, adventure, freedom and spontaneity. Grace expected changes in her lifestyle, though was surprised at how quickly they came. Until the day she had Amanda, Grace was connected to the art community and was able to go out whenever and with whomever she wanted. This all changed when Amanda was born.

It was tricky. It was kind of hard, because I lost some friendships. I mean not that they were the most important ones, but it just changes, your day-to-day changes. And so you don’t have the same, at least in the first year, the same kind of freedom to go out with people. Because I had a different kind of freedom for a large chunk of my life, while I was ready to be a mom, when it happened, there is a certain part of my life that isn’t there anymore. I am not complaining. It was, ‘Wow, I don’t have freedom to go that art show or that opening or that.’ So while I loved it, there was part of me that was feeling like ‘Wow, I have lost that.’ And this is something that I have always wanted, but, ‘Wow, I have lost some of that freedom.’

Much like the dissonance she feels regarding the changes in her physical experience, Grace also struggles with the decreased freedom and spontaneity in her life. To Grace, this feels like a loss, yet at the same time she thinks she should feel fortunate to have a child at her age.

I think, ‘Uhhh, I can’t complain.’ I had 36 years without children. I didn’t have children in my 20’s, so I had years of going hiking whenever I wanted to, going in a half marathon, doing everything that I wanted to. . . . I often think, ‘I can’t complain, I shouldn’t.’ I was very lucky to have children later and to have all this time, but there is still this sense of loss. And that is what I find interesting, because at 37 should I be feeling it? Well, I guess so because it is a fundamental change in my life, but really, should I feel this way?
With the loss of some friends, freedom, and adventure, Grace experienced an unfamiliar loneliness after having Amanda. When her mother had died she felt lonely, however, this felt different.

I am not alone because I have got a child with me and I think it is not that kind of lonesome, because there is someone in the room with me and I am looking after a child. . . I think it was lonely for what is going on outside of my life that I am not part of right now. . It just changes. . . . It was a completely new experience, the loneliness. Lonely, I had never really felt.

Before having children, Grace had created a life that included adventure, strong relationships and a close artistic community. During her long days at home with Amanda, she felt isolated from important people in her life. She felt envious because she was not engaging in regular adult conversation and she felt disconnected from her familiar routine.

I felt cut off, I guess, from friends. And Bruce a bit. I mean, not when he was home. It just felt like a different world. I mean, people had this world out there and my world was my home and my baby and feeding and diapers and it was great. But (pause) I don’t know. I mean there is just such joy because look what I have, but I guess other times I would, I guess envy, because I would think, ‘Bruce is at work, he is still talking to people and having adult conversation.’

Grace has started to accept the changes in her life. She is also aware that she has both lost and gained through becoming a mother.

I think it is okay to feel a sense of loss and that in talking to other women and they have gone through the same thing helped a bit too, because you are kind of on your own. I think certainly after having Amanda, in the first 6 months, that is when I probably felt the most, I think sense of loss. But it just changes. So I think, ‘What did I lose?’ I lost some of my identity, my old identity, of who I was, but then I think, ‘I have gained this new identity as who I am as a mother with a child and a family.’

Stories of the New Normal

Although there are moments in Grace’s life when she is reminded of the dissonance, conflict, and questioning that she has experienced since becoming a mother, she revels in the joy that Amanda brings to her life. The periods of negative emotions are short lived when she
reflects on her wonderful family. Grace has experienced a powerful transformation that involves new perspectives, greater self-understanding, and a different appreciation for life.

The joy and the beauty are spending the time with her and watching her change from day to day and having the house to myself. I loved it in some ways and in others there was a bit of resentment, if you are lonely or doing the house work, but at times, like on a beautiful September day, I would be out in the backyard and loved it. I felt so fortunate to know that I have 12 months off and to have a backyard and to just be able to walk outside with her and just, just to be with her.

Since having her daughter, Grace has come to better appreciate the importance of extended family.

Prior to having children, my brother lives in town with his family and two kids, and I was pretty busy and sort of doing my own thing and he would always say, ‘You know, why don’t you come around and see them (your nephews).’ I would make time for them, but not a whole bunch of time for them, enough, but he would always be on the phone and now I get it. . . . But now I understand the importance of taking the time with extended family, not just my little unit of three, but my brother’s family and his kids.

For Grace, the transition to motherhood was quick. And although the change from socializing with friends to caring for a newborn was immediate, the acceptance of this profound change took time and brought discomfort and struggle, though not so much that she ever questioned having a child. The losses of her previous child-less life have given rise to new gains, some of which could not have been predicted in advance and some of which remain to be seen.

Uncomfortable and I guess sad a little bit initially because it is such a change and fairly quickly. . . . It happened pretty quickly, the changes, but accepting them took a little bit longer. But not so uncomfortable that I questioned even being a mother or why did I have a child, because I think it is just understood that is just what happens. And for things that I have lost or have shifted there will be so much more that is gained and I may not see it right now, but I get it. . . . So, I guess it was a bit of a struggle. . . . I am enjoying it a little bit because there is a bit of mystery on the other, because I don’t know exactly where it is going.

Grace is aware of the changes in her life and easily recognizes that her priorities have shifted. Her life before children was full of adventure - doing things she wanted, when she wanted. Since having a child, this self-focus has dramatically shifted to a focus on the
importance of being a mother. Grace likens this to a sense of maturity whereby greater self-awareness has led to greater humility.

I am not as important. There is someone else outside of me that is more important. I think for my whole life there was just me, but I always felt like there should be something greater than just me. . . . More mature. More aware, I guess, more aware of who I am now and the kind of person I am. Because I guess for me, having a child, I just am less selfish. Yah, I am still learning a lot about myself, not that I wasn’t before having her, but now it has sort of opened up a whole new . . . . and some of it is vanity. I think I was so vain before and I am trying to get over that. I think Amanda brought me down in that way, kind of, more realistic.

Grace experienced other positive changes, including increased patience during stressful situations. She states that Amanda has shown her a slower pace and the ability to be more relaxed when experiencing the world.

The physical changes that Grace has encountered since having children have been difficult. Her struggle prompted Grace to challenge her belief about the importance of personal appearance. She has experienced a profound shift in her perspective about her physicality.

It feels okay that there is a shift. I think I felt young before and just physically, I don’t know if I can describe it, but just young and physically aware of myself as just having, a nice body and feeling good about myself and feeling kind of sexy. Putting a lot of pressure on myself about that. . . . it (not being as physically fit) still bothers me a little bit, but in the big picture, it so doesn’t matter. What matters to me now is my daughter, and my relationship with her and my relationship with my husband and you know, as long as I am active and feeling healthy, physically, visually, let it go.

Before having children, Grace thought little about her mortality. Since becoming a mother, and with the death of her own mother, Grace has become more conscious of her mortality as she feels an increased responsibility for both her life and Amanda’s.

Well, my mortality. For me that is a large part of it. I think prior to having Amanda I felt kind of free, and young, and just without worry. Now that I have had Amanda I think about my mortality and being around to raise her. . . . I think, ‘What if we are not around for Amanda in the first five years of her life.’ And, I don’t know. That is something that I worry about or it has been a shift for me, my mortality. . . . The bigger picture, I never even thought about it prior to her.
Grace has acknowledged and accepted that life has changed. A significant part of this change is a powerful shift in the purpose of her life compared to when she was childless. Knowing that she is responsible for Amanda provides her with a feeling of selflessness. Grace is excited about the magnitude and amount of love that she has found within herself. This love is shared with many people in her life.

It seems to fit. Aside from, the obvious, that my life has changed, it feels right. I am still me. I still have the same interests. I have a child that is with me now, that I am introducing to my life and everything that my life has been.

I guess a sense of purpose, like who I am on the planet. A different responsibility. I am just not responsible for myself anymore. And I guess to share and to give love to something else other than me and my partner, that, I consider completely different than a child. . . . So I think that sense of purpose is why I am here. I think if I hadn’t had Amanda I would probably have questioned that a little bit.

Marie’s Story

Stories of Readiness

Until age 24, Marie had lived a relatively carefree life. This changed for a number of years when she was diagnosed with fibroids on her uterus and informed that she would likely not be able to have children. Although Marie envisioned children as an integral part of her planned future, after receiving the diagnosis her focus was on living life and avoiding death.

I had a sweet life, everything was great and all of a sudden there I was in the hospital. . . . I was told that my fibroids had the potential of being cancerous. They weren’t, but it kept me very worried for a number of years. So there was my health, which was the number one thing that worried me, in terms of having kids, I just remember being very upset.

From a very young age, Marie knew that she wanted to be a mother. Fond childhood memories of spending time outdoors and being part of a family unit led Marie to aspirations to create a similar family environment at some time in her future.

I had a happy childhood, so I liked the idea of having that and being on the other end of it and the idea of the team that family was . . . it would take a long time before it was there.
Although Marie had been in a long-term relationship, it was not until she was in her mid-30’s that she met, Daniel, someone she felt would be a wonderful father and husband. Marie maintained a strong belief that she would be a mother, even with the knowledge that having children could be difficult or impossible. Marie and Daniel’s strong desire to have children led them to begin trying to become pregnant early into their relationship. It was Marie’s faith and their intense desire that provided them with perseverance and hope through the emotional years attempting to become pregnant.

I must have been 33 or 32. And I had dated someone for years, yet never thought that we would have children. . . . But as soon as I met Daniel and we moved in, things happened quickly and very decisively. He wanted children, too. So he knew my history and we started trying to get pregnant right away. . . . It (motherhood) always came up. There was no doubt in my mind, ever, that I was going to have children. I would have adopted, absolutely. . . . And that kept Daniel and I going through our entire struggles of getting pregnant, that we would adopt or something.

Once Marie and Daniel were involved in the process of trying to become pregnant, they experienced intense competing emotions of hope and despair. What started out as an exciting adventure into parenthood quickly led to disappointment. Their optimism that Marie would become pregnant without interventions never faltered; however, after 6 months of failed attempts she was referred to the fertility clinic.

You live with this hope and this sort of verging on sort of despair. You kind of exist somewhere in the middle there and you have to have some of the hope and yet you are constantly, sort of, disappointed.

The next three and a half years was a time of intense emotion; however, their desire to have children gave them the strength and determination to persevere through the disappointing days and incredibly invasive procedures. After various unsuccessful interventions, it became apparent that their final option to have biological children was through invetro fertilization.
(IVF). Fortunately, Marie became pregnant after one procedure. She gave birth to a baby boy, Norman.

Marie desperately wanted siblings for Norman. A year after his birth, she and Daniel once again began IVF procedures. Their desire to have more children heightened their disappointment and despair each time they experienced an unsuccessful IVF procedure. Finally, after their third attempt, Marie was pregnant, with twins.

Having twins initiated feelings of fear and excitement. Marie had always wanted to have three children; however, having three children under the age of two was a daunting idea. Marie and Daniel were informed of the risks, costs, and possible complications associated with twin pregnancies. This information and the reactions of friends added to their own fear and anxiety.

There was a lot of trepidation. They fill you with that at the fertility clinic. For good reason. Twins, twin pregnancy are a lot more complicated, they are a lot harder on the woman. Twin births are harder and potentially a lot more reasons for hospitalization, on and on and on. . . . So, we were a lot more anxious. Plus all of a sudden we were going to have three kids. Good god. (Laughing) I felt awful when I was pregnant with the twins. I was not happy. I had terrible, terrible insomnia and terrible heartburn. I was working. (Laughing) Not very hard. I wasn’t doing a very good job either. It wasn’t the highlight of my career, but I was excited. I had always wanted to have three kids.

Unlike Marie’s first pregnancy, her second was filled with challenges, drastic physical change, and mixed emotions. These experiences contributed to difficult changes in Marie’s life.

*Stories of Transition*

Marie endured three and a half challenging years to become pregnant with her first child. She enjoyed a healthy, happy pregnancy and reveled in being “part of the gang” as many of her friends had already had children. The parenting community became a significant resource for Marie. For example, when she struggled with feelings of boredom after having Norman, she had good friends who would validate her emotions and experiences.
Well, when you have kids, it is like a big huge village of other parents, who sometimes want to tell you what you are doing isn’t right, but who mostly just want to share. . . . I remember being bored a lot of the time and I was surprised by that. . . . But you know, my girlfriends would say, ‘I am bored too’ so it felt okay. I never felt guilty. I felt like it was normal. . . . I would feel very validated by that.

Marie described the profound impact of her relationships with other mothers. These women provided her with resources, a place to acquire knowledge, and a means to solidify strong, genuine relationships.

I felt like the community of motherhood has been a great saviour for me. It has been very, made me feel okay. . . . It (her mothering community) has been possibly one of the best parts of it.

Marie was 37 years old when her son was born and 39 years old when she had the twins. For Marie, the transition to motherhood was challenging because of the many years she spent traveling and focused on her career. Although she felt ready to have children, she experienced difficulty accepting the lack of spontaneity and flexibility once her children were born.

I suppose having had a career for over 10 years and I traveled all over the world and lived all over the country and stuff. So having had that sort of level of travel and flexibility and independence and ambition made it hard to settle down. Yah, made it very difficult. I didn’t think it would, because I felt very ready for it, but because it took so long to get pregnant it felt like it almost spanned over such a long period of time. . . . It made it difficult because I had an expectation that I could just pick up and go whenever I wanted. I found that very challenging.

Marie’s first experience with the changes and challenges of motherhood occurred when she was going through the fertility process. She felt confined by the procedures, which were more emotionally and physically demanding than she had anticipated. Marie altered her physical activities for fear of having a negative impact on her ability to become pregnant. It seemed to her that she had put aspects of her life on hold, and thus she felt conflicted between wanting to be ambitious and feeling a sense of responsibility to become pregnant. Since having children, she has reconciled the conflict because she does not have time or energy to fulfill all her ambitions at
this point in her life. Marie believes that much of her life, who she was, what she did, and how she lived changed during those three years of trying to become pregnant.

I had been so independent and so physical and so adventurous. You know, lots of traveling and living in different places and just constantly going, and constantly unattached. . . . I was ambitious, but ambitious about a million things, not just my work. So I felt like I had lived really large and then I was anchored down physically, emotionally, in a lot of ways and just felt, kind of trapped a bit. . . . So that was kind of the beginning of what I have found are the challenges of being a mother. That was the first time that I felt like I was being sort of pulled down a bit and not able to do, what a side of me really wanted to do. Sort of this impetuous side or something where I felt compelled by responsibility and by pure fact that I couldn’t do all the things that I had always done.

Marie experienced three years of uncertainty and dissonance while attempting to become pregnant. She felt a sense of responsibility to focus on becoming pregnant; however, with the uncertainty of the outcome of the process she wanted to continue to live life as she had in the past. Marie felt torn, as she wanted to advance her career and continue to travel; however, it seemed impossible in light of the fertility process and her desire to do the right things to become pregnant.

I wanted to push harder and couldn’t. I wanted to travel more, but where are we in the cycle and when are we going for that appointment. It felt like we couldn’t go places. . . . I wanted to ramp up my job, but yet, I didn’t feel like I had the emotional energy to do it, nor did I think it was very strategic because, here I was ramping up my job to what end. I only wanted to bow out of it. I had my heart set on becoming a mother and sort of, cutting out work a little bit, and yet, I wasn’t one (a mother), so what do I do? It was sort of like you are caught in limbo. And I was caught in limbo for a long time.

After being at home for a year with Norman, Marie returned to her employment as a part-time radio journalist. At this point, she continued to experience uncertainty with her career situation. Marie expected that her job would be as fulfilling and exciting as when she left; however, this did not transpire. Upon her return, she was saddened to feel expendable and overlooked. Marie was disappointed to realize that she had been disillusioned about her ability to return to her work and feel as valued and satisfied as she was prior to having children.
They (employer) had found work for me in a similar capacity to what I had been doing before he was born, but I was kind of, an-add on to the show. Kind of like an accessory that no one really cared about. Everyone really liked me, you know, ‘Whatever you do is good Marie’. I got a lot of that, which was baloney. So I felt like, for the first time, no one really gives a crap what I am doing work wise, no one really values the stories that I am doing, and yet, no one really undervalues them. I am just kind of out there. And I could leave and no one would notice.

I kind of realized that I was sort of forgotten. And journalism is a crude world. . . . It is just that, I found myself, it is sort of cliché, but as a mother trying to keep my foot in both worlds. It was very challenging and I am sure it will continue to be that way.

Their second attempt at becoming pregnant made the transition to her new position more difficult. Marie felt stagnant at work and focused her efforts on becoming pregnant. She attempted to modify her work situation to become more exciting and appealing; however, it was difficult with the appointments and commitments of the IVF process. Marie’s desire to work and passion for her career clashed with the negative emotions she experienced. She was not enjoying herself and did not feel as though she could, or should, invest in advancing her career with the knowledge that she might soon become pregnant.

That was very hard. I wanted to be at work. I didn’t want to stay home full time, yet when I would go to work it wasn’t the way it had been. I had always been on this upward trajectory, and then I wasn’t. So, I was barely coasting I guess. You know, treading water. So, that was very hard. . . . I had a total split. I am trying to take care of him most of the week, go to work, and yet I didn’t really enjoy it, yet I wanted to work and yet half the time I was running out to have ultrasounds too. So, it was very fractured and very challenging in many ways.

Several months after Marie returned to work, she became pregnant with twins. Many aspects of her experience with the twins were more challenging than with her first child. Marie struggled with both the physical and emotional aspects of the pregnancy. Marie wanted to be happier during her pregnancy; however, the physical changes, the exhaustion, the fear and anxiety, and the physical discomfort outweighed the excitement that she “should” have been feeling.
I wasn’t enjoying myself as much and people would say things. They said, ‘Oh my god.’ Or I felt so sick and they wanted me to be so excited. People told me endlessly, ‘I really wanted to have twins.’ And I would think ‘Fuck off!’ I felt so crummy and I felt bad. I thought, ‘Oh, yah, do you want one of them?’ I was just not very happy and compared to my first pregnancy, power walker, skier, everything. With the twins I just sat in my Lazy Boy and tried not to get heart burn. I felt bad that I wasn’t happier. . . . I felt bad because I was pregnant and I wanted these beautiful babies and yet, I wanted them out of me.

After giving birth to the twins, Marie was fully engulfed in being a mother of three children. She was disappointed that she was not as capable at managing the “chaos” as she had anticipated. Her experiences as a mother continued to challenge her identity.

I felt worse because it was a hell of a time. We did very well with one child and I don’t mind the busyness. . . . I always thought I would handle the chaos of three babies much better than I did. So, that was very hard.

Prior to having children, Marie had envisioned the type of mother she wanted to be. She anticipated being able to attend to each child’s needs and understand their cries. Her notions of what she could do and be as a mother changed during the first year of her twin’s lives. She felt inadequate through the difficult times. Marie felt responsible for creating a calm and relaxing atmosphere; however, she rarely felt peace in the home. In addition, Marie’s time was occupied with the twins, making it difficult to be the mother that she wanted to be to her first son.

I wanted to have a crying child and make them feel better and I felt sort of annoyed half the time. I felt very inadequate. . . . I didn’t have visions of myself as sort of the Madonna with the baby, perfect child, but I did have visions of knowing what my child was going to be like and give them their basic needs.

With two kids you are making one happy and the other one is getting madder. So you go to the other one and the first one is mad. So, you felt like you were never a mother. It is not that you never felt like a mother, but you never felt like the mother you wanted to be. You were endlessly putting out fires and never feeling like you were, who you were was enough.

Before having children, Marie’s life was filled with spontaneity and freedom. The various fertility procedures left Marie feeling constrained and limited. Once her son was born she managed to regain her sense of spontaneity and activity level; however, the issue resurfaced and
became even more poignant in her life after the twins were born. The emotional and physical freedom that once came easily to Marie was no longer present.

It is so hard. I feel like so much of who I was and what I was proud of and sort of how I would have defined myself was just not there. I mean I used to go backpacking and find somebody who wanted to go and off I went. Even with just Norman, it was much more complicated, but we did lots of stuff with him. We put him in the pulk (cross country ski trailer) and went skiing for the day. We just can’t. I don’t know how you take 3 kids skiing, right. We don’t have a double pulk. It all becomes so much more complicated now. . . . It used to feel like everything was accessible, literally, physically and emotionally accessible. Like I could just do anything, and now, it feels like, I can’t.

Much of Marie’s self definition was intertwined with her career as a journalist. It all began with a thirst for knowledge and passion about worldly issues. She thrived on disseminating information to others. Before children, Marie embraced knowledge and used it as a means to develop strong opinions. She prided herself in her ability to inquire and view a topic from various perspectives. This had always assisted her in feeling confident about her choices, decisions, and opinions. Since having children, Marie has noticed a significant lack of time and energy to contemplate important topics. Due to this she feels less sure of herself and lacks confidence when making decision or forming opinions. These are unfamiliar and uncomfortable feelings that challenge her sense of self.

I have fewer opinions about things. I think a lot of people become very opinionated as parents. But sometimes I can’t remember what I think about things. ‘What do I feel about that again?’ You don’t have the space in your life to sort of, muse things and so, I sometimes thought I had a very strong sense of how or what I thought about anything political or environmental. And now, I am not so sure anymore. I feel much more cautious. . . . Now I feel much less confident.

Before having children, Marie was not only confident in her abilities as a journalist, but with her social interactions. This shifted considerably throughout the three years while she was at home with her children, particularly the last year with twins. Social settings led Marie to feel anxious and question her social confidence. In one instance, Marie was concerned that she would
have nothing to contribute to a conversation. Once again, these were unfamiliar experiences that continued to challenge her sense of self.

Yah, like I feel like, like I worry. Weird things. I have never in my life worried about going to a party and having nothing to say. Not like I am some big blabbermouth, but I don’t know, it just I was at ease with that. I found myself the other day, Daniel said that he had tickets to Cold Play with this other group of people and all I could think was, ‘Oh my god. Those people dress so well and I have nothing to say.’

These new experiences, emotions, and changes led Marie to feel anxious. Prior to having children Marie felt she had a sense of direction in her life. At the time of the interview, she described feeling overwhelmed and confused by the possibilities and an inability to make a decision about what direction to take.

I hate it. I don’t like it at all. It is very anxiety provoking for sure. It makes me very worried about the rest of my life. For sure, because I think now my kids are all over a year and okay I’m 40 and let’s go. But where the hell am I going. . . . I had never been a goal person and I am going to do this in 5 years. I have always kind of gone for it and followed whatever door opened up. I just went through it and just went and went right through to getting pregnant. And now, it feels like I have all these doors in front of me and they are all open just a teeny bit, and I don’t quite know where to go or what to do and I don’t know what I want that well anymore. And it is very discombobulating.

The story of Marie’s transition continues with a change in her physical self. Marie’s body changed during pregnancy and childbirth, making it difficult to return to her previous fitness level. Prior to having children, Marie prided herself in her physical activity and good health. She described her physical activity and her emotional well-being being closely connected. Expecting to maintain a certain level of fitness after having her children has caused frustration and disappointment for Marie. With the demands of three children, it is a constant challenge to find time for herself. This has left Marie feeling both physically and emotionally heavier.

That has been huge. The first time I lost the weight quickly and pretty much back to normal. I started to run again, which is a great saviour and filled me with so much confidence and happiness and sort of gave me breaks from the family and everything. And I started to develop problems with my hips, essentially. So that was troubling. Then I got pregnant again and I was just uncomfortable. And so now, I am mostly back, you
know. I am heavier than I was and that is very hard. Like I am not a super vain person, but I sort of relied on a certain level of physicality that I found very difficult to get now. . . . I don’t quite have the time, so I am always a little bit heavier in all senses than I want to be. I just don’t feel like I have the access to the same level of things that I am used to. So, that is hard. Because, for me running . . . . gets me outside and gets me away from everybody else and keeps me in shape and keeps my weight feeling like it is where I want it, like I feel good. And now, I don’t quite have that because there have been lots of problems. So that is very hard. In fact, that is one of the biggest challenges for me. It is so tied up with my emotional health too.

Marie had a strong sense of who she was before having children. Over the past six years, which includes the entire process of the fertility procedures and having three children, she has lost her certainty and confidence about who she is. More recently, Marie finds herself in the process of rebuilding and recreating herself.

It is a huge change. What I would have thought of myself as a very adventurous person, independent, sort of mostly carefree, community oriented. And now, it is hard to even know. I am starting to get back some sort of air flowing through my life. What is my identity now? I guess it is a work in progress, right.

Marie knew that life would be different with children; however, she did not expect her identity would be challenged to the degree that it was. She was sure of herself, who she was, and how she responded to the world around her. With such a strong desire to be a mother, she is surprised to experience moments of reminiscing about her flexible, exciting life before children. She does not feel she deserves to miss her life before children as she had already lived such a full life.

Maybe I didn’t realize that I had led a sort of Marie-centric world and I had a lot of flexibility in my life. . . . I was very impetuous and it just doesn’t work so well with kids. I was ready for it and I wanted to be in a place. I wanted to live in Calgary and just be here. But there is the old me sort of yearning. It is kind of sad and I look at pictures of traveling and I never thought I would feel like this, but I feel like, ‘Oh my god.’ And I think ‘God, Marie, don’t be like it’s kind of . . .’ It is sort of cliché to get out the old albums and listen to the music, somehow like your yearning back for your youth. But, I think there is a side of me that does, sort of, miss that. I never thought I would.
Marie did not anticipate that becoming a mother would mean rebuilding her identity. Instead of adding another layer to her life, as Marie anticipated, motherhood led to a feeling of fragmentation. Now that her children are getting older, she feels that she is on the edge of having more space, time, and energy to gain her sense of self.

Maybe I didn’t know that it would be so different, that I didn’t know that I had to build it back up again. I thought it would kind of just add another little bit to me. Not just a little bit, that sounds silly. I thought it would have added a whole other level to me and then I would just be this bigger person. Maybe that is a good description. I never saw myself as one of those superwoman, career and do everything, but I did think I would have a whole bunch of that. And I think that I have been surprised that, it is almost like I feel like somewhat shattered. The way I was, isn’t, and I don’t know why. You live 33 years really all about you and all of a sudden it is so not about me anymore. . . . And it is becoming more, and maybe I am just on cusp of heading out.

Marie effortlessly and colourfully shared her experiences, emotions, and stories about her transition into motherhood. She noticed, however, that many of them focus on negative emotions and stories. Recognizing the joy and wonder of the many magical moments that are associated with motherhood are also a prominent part of her story.

It is not that that is not true it is just not the whole story. That yes, there are lots of moments that I feel trapped and perhaps the reason that I brought them up is that they surprise me the most. But, there are far more moments when I . . . . I mean, there is nothing in the world, there is no traveling, no backpacking trip that could fill me with that kind of joy and amazement and just thrill you to the core just watching your own children.

*Stories of the New Normal*

Although Marie acknowledged that much of her story focused on the negative, she is excited to describe the self-discovery that has taken place since becoming a mother. She explained how motherhood has provided a different sense of consciousness about the world and how she responds to it.

I am very patient. I had no idea I was patient. I, in fact, I would have thought I was a very impatient person. And I am in other contexts. But at home I have a lot of patience for my
kids. . . . I lose my temper sometimes for sure. I seem to be able to hold myself apart from their emotion a bit.

Marie feels an incredible love for her children. Attached to her feelings of love is an extreme sense of responsibility and protectiveness. Before having children, Marie was responsible for herself and her life. Now she feels part of something bigger and more important than herself. She feels compelled to be the protector of her children and to be aware of the world around them. Marie has experienced a love and bond that was unknown before children.

My older son gets colds and when he does he gets restrictive airways. Well he pants at night and I sleep with him. You could feel like you just want to wrap him right up in your arms and just hold onto him. Like you want to give him your breath, like you would just do anything to make it better. . . . And it is a feeling that I have never had before for anybody.

Marie has experienced a new sense of personal consciousness when making decisions about parenting and an increased awareness that her parenting practices can profoundly affect her children’s emotional health as they grow older.

Just this sense of responsibility for them and for, I mean it is very daunting . . . . So that is very exciting to be very conscious of what you are doing and aware, you know how you were raised and how you would like to continue on that tradition or deviate from it.

For Marie, the awareness can sometimes lead to worry. The responsibility to do the right thing for her children creates anxiety for Marie.

I never really thought of myself as a worrier, but I do worry about. Like that sense of responsibility that you have and that feeling like you sort of desperately want to do what is right and then trying to figure out what that is. And then maybe trying to accept that you will never know that and you just have to kind of trust yourself.

Marie’s career as a journalist continues to be integral to her self-identity. She thrives on the knowledge that she acquires and the excitement of being part of her local community. Marie had envisioned that motherhood and career would coexist in her life. Although her own mother stayed at home, she respected and learned from the many friends and family who had managed a career and motherhood simultaneously.
It (career) is has always been a huge part of my identity. I never doubted it. I never had visions of being a stay-at-home mother. I never had visions of working, like being one of those 12 hour day mothers either, 5 days a week at all, but I always thought it would fit somewhere.

Marie will be returning to part-time work when her twins are 16 months old. For Marie, after being at home raising children for over 3 years, she feels ready to reclaim a part of her life that is hers alone, which is not to say that she thinks the return to work will be easy. The demands of her job will test her ability to compartmentalize and manage her role of mother and employee. Still, she eagerly awaits her return to work, citing that “it is the right thing to do”.

I am very excited. I am ready. I would like to have something of my own to do, like work. It is work, but it is not too much work. It is 2 ½ days a week, essentially. It will be very, very challenging because the hours are very variable and it is often very early. . . . I know it is going to be difficult and the kids will have a hard time at first, but it is the right thing to do.

Marie is very excited about the opportunity to reclaim an important part of her life, however, is realistic about the difficulty in following the “upward trajectory” that she has associated with full time work.

I just think that it is just the nature of it. I don’t think that working part time can ever be . . . it is not working full time. I mean, period. But as a mother, particularly, because not only are you working part time, but you have a million other things going on in your head and trying to squeeze in and phone calls to make and whatever. So, you have sort of got this fractured kind of world.

Marie is able to reflect on the changes she has experienced through becoming a mother later in life, and names this process as a transition. She expresses excitement about the possibilities of life with children and sharing her love for the outdoors with her family. She feels liberated to absolve herself of the sole responsibility for managing all three children. Marie envisions a life that includes aspects of her life before children, manifested in a manner that will include the entire family.
Well, I think it is a transition, but I don’t think it is a transition back to the way it was. I think it is a transition to a new normal, which is totally good. I am all for that. I think I just, I do need some of what I had back and will get it. . . . It will transition into something, but it won’t be what it was. But that is okay. . . . It is not that my identity or who I was or my happiness was so locked up in being able to go backpacking for a week. But it was locked up and it will hopefully forever be locked up in a feeling that I can go and access a bit of that wilderness and that activity. I don’t mind if it is hiking a kilometre and staying in one place for three days. That’s fine. I want to be able to share with my kids. I want them to see that side of me and to have that side for themselves too. So, it definitely is a sort of transition into something new.

Cassandra’s Story

Stories of Readiness

From a young age Cassandra was intent on becoming an independent woman. Financial independence would be established through building a successful career. This was Cassandra’s focus into adulthood, continuing through to her mid 30’s. Through these years, having children was not a priority.

It was a thought, but I wasn’t with anybody and I was very, very, very, focused on building a career. For me there was always that risk. My mom and dad divorced. It was always, you had to be able to take care of yourself. That was always my primary focus. And that is what she (mother), I think, pushed on me because of her own circumstances.

By the time she was 30, Cassandra had exceeded her career aspirations through becoming an international expert as a management information technology (IT) consultant. About this time, Cassandra priorities began to shift. Numerous friends were having children, leading her to begin imagining having a family of her own.

Some friends had had children and I was sort of like, ‘Gee, you know, maybe I would like to have a family.’ Because you know I already had a really great career. I was making more money than I thought I would ever make and I was only 30. I thought, ‘Great.’ I am set. To me that was the main thing, to be set. That is when I really thought about it.

Soon after Cassandra turned 30, she met a man in her home city. Although she was in the middle of a job appointment in another country, they maintained a long distance relationship and
married upon her return. Children had been a fleeting thought prior to marriage; however, once
she had committed herself to marriage, she easily envisioned children in her life.

I hooked up with him here and then went overseas. When I came back we got married. It
was the first time I seriously thought, ‘I should really have some children now.’

Unfortunately, their plan of marriage and then children did not continue as anticipated.
Although she wanted children Cassandra and her husband were unable to become pregnant.
After a few physiological tests she was told “to just relax and try not to have any stress.” It was
while trying to become pregnant that Cassandra realized she did not want to have children with
her current husband. After a few years of marriage, Cassandra and her husband divorced. Once
divorced, Cassandra began to challenge the belief that her career was more important than
anything else in life. The constant travel and extended hours at her job left her feeling
disconnected from her family and friends. Cassandra sensed there must be something more to
life than work, though struggled to articulate exactly what this was.

I think that happening (the divorce) and not feeling connected, particularly. I mean I still
had the same friends and family, but I was always gone. I was really starting to feel like,
‘Is this all there is?’ This constant movement. On the go. Work, work, work, work, work.
You know, ‘Is there anything else?’ I figured there was something more important and
something that I would value differently. I just didn’t know what it was exactly.

Soon after her divorce, Cassandra met Chris. Not only did she feel instantly connected to
him, her desire to have children also became more intense. As she became more focused on
starting a family, it became increasingly obvious to Cassandra that her values were shifting. As
an only child, Cassandra’s experience of family was enhanced through close friendships, and as
meaningful as this was, it could not replace the desired presence for biological siblings.

At age 34, Cassandra and Chris committed to marriage. Once married, Cassandra’s
feelings of wanting children became increasingly intense and with great conviction, they started
trying to become pregnant. After several unsuccessful months, she began to question her ability
to become pregnant. Finally, after numerous visits to the doctors, she was referred to the fertility clinic. Following a long process of waiting and testing, Cassandra received devastating results. She was informed that it would be physiologically impossible to have children due to blocked fallopian tubes. She understood this to mean she would not be able to have children. The results created a multitude of emotions for Cassandra, including an even greater desire to have children.

Eventually, Cassandra was told that the only option to have children was through the process of invetro-fertilization (IVF). Although she had once believed she would never have IVF, it now represented her only chance to be a mother. Cassandra and Chris experienced shifting emotions of excitement, hope, and disappointment through the process. Feelings of anger and resentment crept into Cassandra throughout this tumultuous time. She had spent years creating a life that would afford a family, and then the one thing that was supposed to be the most natural for a woman, was taken from her.

You are supposed to be able to have children because you are a woman. . . . I felt very angry. I think, just ripped off. Like I am thinking, ‘God, you know? I have tried to do everything that I can. You know focus on my career and make sure that I am set and settled and I can look after myself and I can look after a family and I have done all that. Good, good for me.’ And I felt just, I guess angry because I felt ripped off. And I thought, ‘This isn’t fair. Why can’t I have children?’

After four months they received the call. They began the invasive procedures that would provide them with enough viable eggs for the IVF procedure. Obstacles continued to plague the attempts to become pregnant, causing havoc on Cassandra’s emotions.

We got the call and we went in and you know, you have to start jabbing yourself with needles and then taking this and that and I did that. And I was going to do all of it, just to make sure that if I did all these things, one thing would work. . . . It did work, but barely. They give you all these fertility drugs and they say you are going to get 10 or 15 eggs. They will fertilize them and then maybe get 12 embryos. That is generally what they look for. I got one egg. Ouch. After two weeks of massive doses of fertility drugs. They kept giving them to me and they would do these little ultrasound and they would say, ‘Oh. We have to increase your dose, increase your dose.’ Anyway, they got one out.
After engaging emotionally and physically in the process, Cassandra was devastated that only one egg was going to be fertilized. The expectation of producing more eggs created incredible disappointment for Cassandra. The disappointment continued when she was informed of the low chance that the fertilization process would be successful. The process was becoming increasingly disheartening.

So, one (egg). I was pretty disappointed and they phoned me the next day after I had sucked back ¾ of a bottle of wine and whatever else. I was like, screw it. They said, ‘We have fertilized the egg, but there are no guarantees it is going to stay that way. Their cells have to divide.’ They phoned me the next day and said, ‘It is working, so we are going to book an appointment to put it back.’ I was like, ‘Great, you are going to put my one little embryo back in me. Woohoo!’ Usually they put 3 or 4 back at my age.

With the dismal odds of a successful fertilization, Cassandra’s hope diminished, leading her to experience numerous emotions. She was angry and heartbroken, yet remained motivated to continue to follow through with the IVF procedure.

Although Cassandra did not believe that the process was going to be successful, a good friend suggested that she change her attitude and imagine the embryo attaching to her uterus. Every night for two weeks Cassandra would focus on her embryo and her uterus. Every day she would take a pregnancy test. After many highs and lows through the fertility process, Cassandra, fortuitously, became pregnant, and gave birth to a healthy baby boy, Connor.

*Stories of Transition*

The day Connor was born was a surprisingly emotional day for Cassandra. Although she anticipated a strong love and connection for him, she did not expect the enormity of her love.

Just how much love I have for him. It is like I grew another heart or something. I wasn’t expecting to feel that way. I knew I would love him of course, I just wasn’t expecting it to be so all encompassing.

This was the first of many unforeseen emotions and experiences for Cassandra. She prided herself on being prepared and organized for any event in life. Cassandra approached
preparing to have a child in a similar organized fashion. Feeling confident after reading and researching various aspects of motherhood and infants, Cassandra felt ready to have her child. Unfortunately for Cassandra the results of her research created a false confidence that soon led to anxiety once Connor was born.

When faced with a child, I am thinking, ‘If I just do all this research and I just read, I will be good.’ . . . I don’t think it prepared me that well. . . . Baby comes and, uh, I mean it was just a shock because I didn’t know what to do with it. It was like, ‘Huh, it’s crying. Why is it crying? I changed it, I fed it. It is not supposed to cry.’

Well for me, it was a little bit tricky because I am used to always being prepared. It is my job to be prepared. Um, so I was a little bit unnerved by that I think. I didn’t like it. I didn’t like not knowing what was going on. I felt like, ‘Oh my god, I am supposed to know everything.’

For about the first 6 months of Connor’s life, Cassandra continued to research child rearing hoping that her anxiety would subside. Ironically, it was her decision to cease reading that allowed her to relax and enjoy being a mother.

It was actually quite liberating to just stop it. Once I let go of all that reading I felt a lot more relaxed and more comfortable. I would just enjoy myself with him and, really none of these things are a big deal, the pooping and the weight gain. They are not.

So once I sort of let go of that, I felt more relaxed. I found it more rewarding at that point just because I was more relaxed.

Not only did Cassandra experience anxiety around Connor’s health and development, she now had a sense of responsibility that accompanies the acknowledgement of an infant’s inherent vulnerability.

Why didn’t he poop this many times today? You know how it is when you have a baby? You have the nurses coming over and everybody is weighing him and asking, ‘Has he put on half an ounce?’ Oh, no, there is something wrong. My friend’s kid sat up first and then I would think ‘oh my god, he is autistic.’ You know and duh, duh. All of my fears come out. All of those fears were focused on my son. I had never had them for myself. Then all of a sudden, here is something that I really loved and was concerned about. I mean, I obviously care about myself, but I always thought, ‘I can take care of myself.’ This little helpless, little infant I think was the difference for me.
Prior to having a child, Cassandra focused on creating an exciting career and lifestyle that included travel, freedom, independence, and financial stability. During the time when her priorities were shifting from her career to having a family the realities of parenthood led Cassandra to revise her image of who she would be as a mother.

I had these really crazy ideas about how to be a mother and how I would do it, that haven’t actually panned out at all. But I thought because my life was always about, uh, going away and, ‘Oh, look I am in Italy this week. Oh, I am in London. Oh, I am so glam.’ So, I thought, ‘Yes, Cassandra. You just have a child and you just pack it along in your little designer whatever and off you go. You can just do whatever you want. Your life doesn’t have to change.’

Prior to having a child, Cassandra believed that parenthood would bring little change to her personal life and career. Her view was that mothers should continue their careers once they have children and that those who did not were setting a poor example.

I told Chris that this was it and he could have smirked and said okay. He didn’t crush my spirit until later my child crushed it for me. So, I thought this was it and we were going to do all these things. I had these ideas that motherhood wouldn’t change my life or career that much. It was funny. I almost felt contempt for women who were stay at home moms at the time. I remember thinking, ‘Is that the best that you can do? Is that all you can offer? What kind of example are you setting?’ I was really jerky about it. And that was probably my feeling all through my 30’s right up until I had Connor and wished I could stay home every day for the next 30 years. But I didn’t know.

Cassandra began to experience parenthood very differently during the first few months of being a mother. The lifestyle that she had originally envisioned changed drastically. Cassandra’s lack of experience with babies and her parental anxiety added to her apprehensions of regaining her pre-child existence. Suddenly, the comfort and familiarity of her own home and city became very appealing.

I am not taking him. I don’t even want to leave the house. There are germs, there are things. First time mother, I was an absolute freak about it. I didn’t know how to . . . if he cried I was like, ‘Oh my god, what’s wrong?’ I didn’t really have any experience. I didn’t ever babysit. I didn’t really know anything about kids. I realized pretty quickly I didn’t want to do any of these things I thought I could do.
Quite happily I was happy to let them go because I was much happier, you know, the putting him in the chariot and walking him down the path. That, to me, that was fantastic.

Before having Connor, Cassandra could not imagine why some women would choose to stay home with children rather than focusing on a career. Since becoming a mother, her beliefs and values have changed dramatically. There is now a new focus in her life that overrides her career, and she can now better relate to mothers who do not work outside the home.

The shift. I was so career focused always that I couldn’t figure out why anybody wouldn’t be focused on their career. Like, this is the thing. You have got to be able to look after yourself. So that focus was there and once I was at home, I realized this is different. It is better. I liked it. I mean I would love to be staying at home now. I can’t, but I would be happy to do it, which is just a big shift. I just realized that this isn’t what I thought it was because again, I didn’t really know what it was. I just thought, ‘What do you do? Go to Gymboree all day?’ Or feel like a Stepford wife or something. But, it wasn’t what I thought and I just realized I was kind of harsh on these people and thought that it wasn’t really fair.

I did not want to go back to work at all. I have gone from, ‘I am focused on my career to pulling teeth making me go back to work.’

Cassandra’s shift in focus led to feelings of dissonance and guilt soon after she returned to work a year after being off with Connor. The transition back to work began smoothly as there was no travel and she arranged with her employer to work from home. However, with a shift in the markets and minimal local opportunities, Cassandra began to take contracts in the United States. Although the travel would have been similar to her schedule prior to having her son, she felt incredibly guilty about being away. Cassandra did what she could to avoid long distance travel, even if it meant misrepresenting her qualifications as a way to lose contracts. Once her employer became aware of this, Cassandra had to relent.

Then the first thing that came up was something in New York. I had to have the interview with the client there, so I tried to sound really stupid and they didn’t want me. . . . I tried to make it so the clients would come back to my employer and say, ‘Well, I don’t think she is the right resource.’ So this went on for a while. Then my boss phoned me and said, ‘I totally know what you are up to here. You are my number one person in this area and
no one wants you. What are you doing?’ And I know her, so she was kind of on to me. So the next one I tried not to do such a bad job, so they took me. . . . So I had to go to Dallas.

Although Cassandra, Chris, and Connor attempted to adjust to her long-distance work schedule, eventually they found it too difficult for her to be away for days at a time. Connor was missing her; Chris was exhausted; and she was experiencing overwhelming guilt. This difficult experience caused her to revisit her intentions and purpose of having a child and a family.

I went the first week and my son was quite upset. My husband was pulling his hair out and I had a lump in my throat every night. I am sitting in Dallas with this big lump. Because I thought, I felt really, really bad and I thought, ‘This is not the reason that I ended up going through all of this to have a child, was to sit here in another city.’

The strength of the emotions surprised Cassandra. The extent of her guilt and selfishness led her to search for employment that would allow her to be home.

That was quite a shift. I mean I never would have thought that before. That lump in my throat. That was a new thing for me. I didn’t think I would feel very good about it, but I didn’t think that I would feel as badly as I did. And I felt really neglectful and really, really selfish and you know, this has got to stop. And so I was only there for two weeks.

Cassandra knew that making a change in employment was the right choice for her and her family. It was during those intense emotional moments that she knew that her former career-oriented lifestyle was incompatible with her new values as a mother.

Because I felt like, someone put in front of me, ‘You have to do this for your work.’ But I am a mom and they didn’t go together.

Cassandra now works at a position that allows her the freedom to be home by 5:00 pm on weekdays, which means she is able to enjoy dinner and evening time with her family. She does not have to work on weekends and feels much less pressure at her job.

Feelings of guilt have extended to other aspects of Cassandra’s life as a mother. The experience of putting Connor in daycare is a poignant memory for Cassandra. Although she now accepts the benefits of daycare for the entire family, it was an extremely emotional transition.
It is horrible. I mean, I first went in there and got a tour of the daycare as they recommend. It just seemed like this piddly room and this horrible, all these babies and stuff. I felt really guilty. You know, this is ripping my heart out kind of thing.

Over time the guilt about working dissipated as she came to realize that her son enjoyed the activities and social interactions experienced at his daycare. She admits, however, that on occasion she still experiences guilt about not staying at home, and wonders if she or her son are missing out on shared experiences if they were home with each other.

Although many of Cassandra’s personal relationships became stronger throughout her new experiences of motherhood, one changed significantly. Cassandra’s best friend, who did not have children, seemed to have a difficult time understanding Cassandra’s new life with a child. This friend, along with a few others attempted to include Cassandra in their social outings. However, Cassandra did not feel comfortable bringing her son to fancy restaurants and eventually the invitations became fewer and fewer.

Over the past two years Cassandra has chosen to spend time with her family instead of going out to social events or traveling. In spite of the anxiety she experienced when thinking about traveling with Connor, she feels ambivalence towards her freedom. At times Cassandra imagines what it would be like to slip back to her old life of fancy restaurants with childless friends; however, there is another part of her, perhaps even stronger, that is happy to stay at home and not have to go through the rituals of readying herself for a night out.

I was going to continue to do everything that I had always enjoyed doing and when my son came I just thought, ‘Oh, this is not going to work.’ It is not going to fit into my world view plan of things to do by next month or by next year. So that kind of completely deflated all my idea and then I thought, ‘What am I doing here? What am I about? How am I going to approach this?’ Because I always loved that, I always loved the constant change and the travel and just seeing and doing different things. I mean I suppose I could have still done it with my son, but I didn’t want to.
As much as Cassandra experienced emotional times, shifts in values, and changes in career, she described the transition into motherhood as natural and a timely shift for her career and lifestyle.

I didn’t feel like I was giving anything up. And maybe that is because I did it for so long and I spent so much time traveling. . . . I just wanted to go to the lake, in a car. So, I was kind of getting to the point of I have had enough. And maybe it was that the timing was right that way.

When Connor was about 6 months old, Cassandra had a realization that life with a child was going to be different than she had anticipated. When she experienced this, she felt a sense of release. Indeed, she felt free.

It was actually a little bit liberating to just not feel so much pressure. So many of my friends are still doing all of the things that we all did together or separately, but on the same kind of path. And I just thought I don’t have to do that anymore. It was freeing.

Stories of the New Normal

Cassandra did not expect that her life would change so drastically upon becoming a mother. Consciously choosing to forego travel, career, and social opportunities came as a surprise to Cassandra. It was not until she had Connor and reflected on life before him that she realized how selfish she once was. She was able to do what she wanted, when she wanted. However, with motherhood came a huge shift in priorities.

It has really changed who I was. Because my focus before I was a mom was really (pause) self-centred.

That was great, but being a mom has changed all that and it has changed my desire to want all of that. I am just not interested anymore.

Although Cassandra went back to work after a year, her career focus has shifted. She is more interested in being home whenever possible and creating a loving environment for Connor and her family. Her definition of success has changed. Where success was once defined by her career, it is now defined by caring for her son and family.
With the attention on her family, Cassandra has created more space in her life to give. She has time to reflect and learn about who she has become and what is important to her.

I have learned that I have a lot more to give of myself than maybe I ever did. I was more reserved about opening things up. And I also used to be more concerned about what I could do. . . . And now, I don’t give a shit anymore honestly. I suck at all of this and I am okay with it. I can’t make you eat this food and I can’t make you pee and poop on the potty. And I think I am more accepting of myself and, I think, other people.

Not only does she feel that she is easier on herself, but she also sees herself as more forgiving of others. With increased patience and a less demanding attitude in various aspects of her life, Cassandra describes herself as a nicer person.

I think I am nicer now, because I am more patient and more accepting of people. I think that is a big difference. I am not so sure impressed is the right word, but I don’t care. If you want to be at this or a that, that is great. Before that used to impress me more because I was kind of striving towards that and now I am so not interested in that space anymore.

Despite Cassandra’s increased patience and openness towards others, she still feels strongly that all women should strive to achieve independence and self-sufficiency.

I see a 20 year old girl and I think, ‘Don’t screw around now, because you are going to be 30 in no time and then what?’ So, certainly that is still there and it is judgmental.

Over the two years of motherhood Cassandra has accepted that her perceptions of who she thought she would be as a mother are much different that the reality she is living. All through her adult life, Cassandra loathed the typical parent-child activities. However, she now finds herself engaged in the very existence she loathed. She does this out of love for her son.

I find myself doing things that I never in a million years would have done. Like, I am about to be a soccer mom, which was always my worst nightmare and here I go. I would go swimming and I would go down the water slide and I do all kinds of things that I just wouldn’t do before because I am not interested. I am still not interested, none the less, I do them now. I go to the train show. I go to the day out with Thomas, which was like my worst nightmare to go to anything at Heritage Park. So, you know, I am doing things like that just because it brings so much joy to my son that I want to do it, but it surprises me that I am there, every time I am there.
Cassandra’s life has changed significantly since becoming a mother. She is less focused on career, more focused on family, willing to be a “soccer mom”, and willing to let go of things she valued before being a mother. However big, different, or emotional those changes have been, Cassandra would not reconsider her decision to have a child; if she were to change anything, it would be when she had her child.

It is weird actually. I think if I was sitting down with me five years ago, I would not be recognizing myself. Because it is just such a different lifestyle, it is such a different life. I wouldn’t turn any of it away. I mean, I am so happy that I made the choices that I did. I wish I would have done it earlier. That is my only regret, how long it took me to come to that point to finally do something.

Upon reflection, Cassandra realizes that she had no way of knowing what it would be like to become a mother. Having spent most of her life focused on herself and on her career, she thought there must be something else to strive for. After two years, major changes in lifestyle, shifts in values, and a new definition of success, she realizes that this is what she was searching for.

The thing is when you have had a strong career or strong focus in your 20’s and you have been really working towards something and you are having kids later. . . . You have done all these things, but you have had this idea from when you were a little girl that you were going to grow up and be a mommy and you aren’t and you are like, ‘hmmmm.’ Something more and then when it happens, it is like, yes, this is the thing that I was seeking.

Olivia’s Story

*Stories of Readiness*

When Olivia married in her mid 20’s she knew that she wanted to be a mother; however, it was not a priority until her early 30’s. Olivia and her husband, Jason, had been married almost 10 years before thinking about having children. Although having children was not a topic of conversation, there was a mutual understanding that they were waiting to be “ready” to have children.
I never had this ‘oh, I love children.’ Well, I do love children, but I always thought I would work with children. I knew in the back of my mind that I would want to be a mother.

Throughout their 20’s, Olivia and Jason completed postsecondary education, enjoyed the freedom to travel, and experienced a carefree lifestyle. Olivia described being thoughtful and responsible about making important decisions, such as having children.

I guess I was still really wrapped up in school. I had been in school for so long and it just sort of seemed to be the focus, as well as traveling and just being carefree. I think that I would never want to jump in to being a mother like that. I need to think things through. I had a couple of degrees and that was really all that absorbed my mind really. And then after that it was like, ‘Oh, now I am done school. Okay now I can start my career or work or whatever for a while and kind of get the hang of that.’

Olivia views her life prior to children as a series of stages. Having created a solid foundation for the family, it was easy for Olivia to envision children as part of her life.

Now that I think about it, I think in the back of my mind I knew I wanted to go through those stages of having my schooling, getting married, getting a house and then having children. And, I guess, how that whole timeline played out was that the children would come in my 30’s.

I think for me it probably took a really long time to figure out who I was and what I was really interested in doing with my life. And something around 29 and turning 30 was just a real um, time in my life when things really came together. That was when I finally finished all the schooling that I wanted to do up to that point and I had a job that I really loved and I could actually sort of envision this is who I am and get into some things that I am really interested in doing. Oh, and, ‘I think I could have a family.’

As Olivia was entering her 30’s she realized that the next stage in her life was to have children. Having bought a house, enjoyed the freedom to travel, and established a career Olivia felt that she had built a foundation to start a family of her own.

Olivia believes that the decision to have children was significantly influenced by her friends, all of whom began talking about starting a family around the same time, and all of whom had decided to wait until after their 30’s.
At age 32, Olivia and Jason started trying to become pregnant, which ended up taking a lot longer than the two had expected. Over the three years, Olivia experienced mounting stress in her job situation and increasing anxiety about her ability to have children.

I got pregnant, probably after a year and then we miscarried. And that was really hard because, of course, miscarrying a child is really difficult because we were so ready and it took us awhile and at the same time I really didn’t like my job... I was like, ‘I am working here until I have my baby.’ So both of those things were kind of causing stress. And then, you know, it just took a really long time. So, it was a challenge.

At the age of 35, Olivia gave birth to a baby girl, Maggie. Three years later they had another girl, Naomi, thus completing their family.

Stories of Transition

After an easy pregnancy and labour, Olivia experienced challenges during the first few days, weeks, and months after Maggie was born. Olivia was not producing adequate milk, making breastfeeding incredibly stressful on both. Through tears and frustration Olivia persisted, however, she felt incredibly guilty as she did not feel she was providing Maggie with the opportunity to bond. Olivia became increasingly anxious, exhausted, and guilt-ridden as the seemingly natural process of breastfeeding felt completely unnatural.

Well, there was a lot of crying. I thought, ‘what kind of bond is this with my child.’ Because they talk about the mothering connection: Is it intuitive? You are supposed to know your babies cries and everything is supposed to happen so naturally and it seemed like the most unnatural thing in the world. I don’t know if I felt like a bad mother. It was really, just really awful.

After almost two months, Olivia allowed herself to embrace the calm and content nature of her daughter when given the bottle. With the support of her husband, Olivia made the difficult decision to exclusively formula feed Maggie. Both Olivia and Maggie were able to enjoy each other at a deeper level and develop a greater bond.
I kept feeding her and giving her the supplement, the bottle. We would cuddle with the bottle and she was so happy. I felt like that was really bonding, because we were really having some time to eyeball each other without all the screaming or crying or whatever. . . . And so I think finally the one day I just let Maggie completely have the bottle and not go to the breast and she was just so content. I thought, ‘This is it. We are not going to fight anymore. It is not worth it.’

Months after Maggie was born, Olivia’s guilt about choosing to exclusively formula feed her baby continued. She questioned whether she had persisted long enough and if she was depriving Maggie out of the best nourishment. The choice to exclusively bottle feed permeated into her social experience as a mother. It was her perception that women were judging her for choosing to discontinue breastfeeding. Olivia began to strategically feed Maggie before entering the social setting based on the women who were in attendance.

And then you would go out to talk to people and you would pull out your bottle and they would look at you like, ‘What are you doing with this bottle?’ And I would feel like I had to make an excuse or explain myself. . . . I kind of kept it as much to myself as I could.

Unfortunately, Olivia realized too late that if she had shared her experience with other women they likely would have been empathic and supportive.

The inability to breastfeed also influenced how Olivia viewed herself as a mother. Before having children, she had created a vision and philosophy about how she wanted to be as a mother. She had adopted an attachment parenting philosophy, which holds that one should breastfeed until the child’s first year, and longer whenever possible. Not being able to follow through with her vision was difficult for Olivia until she was able to accept that she had to do what worked for her and her family.

And I think I did have in my head this idea, maybe I did have in my head the type of mother that I would be in terms of my style or what I wanted to do. You know, the breastfeeding, the carrying, all this attachment parenting sort of thing.
. . . I just felt really guilty for not being able to do it. . . . In the end I finally accepted that it is really just whatever works, but that was a long time coming.

Jason was able to help Olivia for the first month with Maggie. While Jason was at home, Olivia’s focus was on breastfeeding. When he returned to work she was surprised with the shift of her role and responsibilities in the home. Before having children Olivia had created an image of herself as a mother that did not include being a “homemaker”. Unexpectedly, Olivia felt resentment towards her husband, pressure to be a homemaker, and challenged with her role and value in the home.

That was the weirdest thing ever, because I didn’t feel like I was tied to my job, nor did I think that I was a real career mover upper. . . . And I never thought of myself as domestic in any way. Like, I didn’t like to cook or clean or any of that stuff at all and so I think I was preparing to take care of my daughter and that’s it. . . . I had all of a sudden become this homemaker and it was really bizarre because I really resented that. All my life I had never thought of myself as a person who actually cooked food, cleaned other people’s laundry, cleaned the house, or any of that kind of stuff. . . . I am quite sure that it was self-imposed that I felt the pressure to do all this stuff. And it just made me really mad, but it might have been in my head. I can’t do this and clean the house and have food or whatever. And he would go, ‘You don’t have to’. But that is all I do. I don’t work, I don’t have a job. I should be doing this stuff. So that took me a long time to realize it is okay not to do all this. But there was definitely pressure to be a homemaker and maybe I just labeled that. Yah, and I really resented doing that. And at the same time, Jason would come home, and I think he was the president of the community association at the time. So, you know, he was talking to the alderman. He was having meetings. He was having radio interview and he would come home and talk about his work and I would be sitting there thinking, ‘Nothing I do is of value. You know, all I do is just sit here and feed this baby and sleep.’ So, that was really weird to think, because I did not think that would happen to me.

The several months of transition after the birth of her first child were particularly tumultuous for Olivia because she had always envisioned being a stay-at-home mother. She anticipated being completely comfortable with the experience. The dissonance associated with being at home with her daughter was unexpected and confusing. Even though Olivia was not enjoying her employment prior to having her daughter and she
had never viewed herself as a career woman, staying at home prompted feelings of worthlessness.

I was really wanting to stay at home after I was done with my job because I didn’t like my job. And now, here is exactly what I wanted and, oh my god. This is not... So, it was like, I imagined myself not being at work when my children were growing up because I wanted to raise them. And I would think, ‘Oh my god, here I am doing that, why am I a homemaker and feeling totally useless, because I can’t get anything done.’ Yah. That was really strange for me.

Olivia was always able to complete tasks well, an ability that had become a strong part of her identity. Following through, completing difficult tasks, and having high expectations were part of Olivia’s self-understanding before having children; therefore, it did not come as a surprise to her that she had the same expectations of herself as a mother. After four years of motherhood, Olivia has experienced a profound shift in her need to be perfect.

Yah, having gone through it now I was really hard on myself. And in a way, I guess I always expect myself to handle everything and do everything and maybe that was always, you know I felt like a high achiever all the time. I put pressure on myself to just be perfect or whatever, and not being able to come through on those was really hard to accept that I couldn’t do this and it is okay and that I am not expected to. . .with the whole house thing, I expect myself to be able to handle the baby and do all the stuff and have the food ready and have the house clean or whatever. It is just an expectation that I placed on myself. So, now having come through it and realizing that, no, I don’t need to be all that and more.

Even though she was aware of the dissonance, Olivia had difficulty easing her expectations. Intellectually she could understand that she was being unreasonable to “be all that and more”; however, she believed that the continuous self-critique gave her an “out”.

I think I knew that I was placing unreasonable expectations on myself and I would remember saying stuff like, to myself, like ‘Why can’t I? I should do this. I should be doing all this laundry.’ All these things I would think, ‘I should be doing this,’ but at the same time knowing in my mind and thinking, ‘You are just saying this and it is totally not true.’ But still, it is weird because your mind just
says these things and at the same time, I knew, I don’t know why I was saying these things. And you know it is not true. Maybe it is just easier to let that criticism keep eating away at you because it gives you a kind of an out.

Due to an unexpected opportunity and challenging financial circumstances, Olivia chose to re-enter the workforce. This was extremely difficult for her as she had not anticipated going back to work after having her daughter and now felt that she did not have a choice. Since she had already created a plan to stay home, she resisted going back to work. Olivia felt like she was caught in limbo, unable to focus and enjoy her career, and unable to be home with her daughter, while constantly thinking about having another child.

Along with feelings of tension with returning to work and resentment towards her husband, she felt incredibly anxious about putting her daughter in daycare. It would give me the sweats every time I would drop her off because she screamed and she would be the one kid out of all of them. They always say that if you saw every child that was dropped off you wouldn’t feel so bad, but, man they had several people helping her and I couldn’t leave and it was very difficult. But then, by the end of the day, she was okay. It was just the anxiousness of prepping for the morning and knowing how hard it was going to be. . . . I think it was both Jason and I. We both went to the daycare to drop her off together and we were both pretty stressed.

Prior to having children, Olivia and Jason had enjoyed the freedom to travel, plan adventures, embrace the outdoors, and develop a strong social network. Since having Maggie, Olivia has missed both the freedom and the activities.

I mean, I look at my life six years ago and what I was doing. It was probably more the things that I was doing than anything. I mean, I just started climbing. We were doing all kinds of cool things. We were running lots. I guess I shouldn’t say that I can’t do those things now, but I don’t. So, I do miss that.

There was definitely an adjustment period with Maggie. It was still pretty fresh in my mind that we had been pretty physically active and I hadn’t been very physically active until my late 20’s. I really hated phys. ed. And I hated physical things and team sports and all that stuff. And then we picked up running and we picked up climbing and you know, it was just, it felt really good to be in good shape. So to have Maggie. The whole
sports thing was also a social thing because a whole bunch of our friends would all go running together and we would all go climbing together and do stuff after or whatever. So that combined with the social aspect was hard.

Olivia and Jason envisioned that they would maintain a similar lifestyle once they had children. Although they had begun to reclaim the ability to engage in various outdoor activities when Maggie was 18 months old, once they had Naomi, they experienced a setback. For some time, they were reluctant to accept that life had changed; however, after attempts to hike, camp, and maintain similar activities with their children they realized that they would have to accept the change.

I thought I would be able to do with them way more than I have been able to do. We were thinking, ‘Oh, we will backpack and go camping and hiking and backcountry and blah, blah, blah,’ and then you realize that it just takes 4 hours to get out of the house. It’s like, ‘Is it really worth it?’

So, we would say, ‘Okay, we are going to go to Heart Creek and then hike all the way.’ And then we were hiking and she doesn’t want to walk and you are carrying her and she takes 20 minutes because she is standing there staring at a rock or something . . . And not even being able to go like a kilometre is quite disappointing. And it would be frustrating.

And for a while, that was an adjustment, we were resisting it a lot and thinking that, thinking that life could be the same and we could do the same things, but then coming to the realization that this is not your life anymore. This is your life and you have to embrace it, you know. That was really hard.

Since becoming a mother, Olivia’s relationships have changed, mostly with women who do not have children. Although they remain friends, the dynamics and interactions are different, which can be difficult for Olivia.

I miss the friends that I had before I had kids, because it is just not the same kind of relationship. Like, one of my best friends has never had kids and she is in her 40’s and she is in such a different place than us now. I mean, of course we all are, but completely, completely different life. So while we connect every once in a while, she just does not get it.

You just don’t talk about your kids because you are sitting there and say, ‘My child did this, this, and this today.’ And she just stares at me like ‘Okay, next.
Next topic.’ So, that is kind of weird, because this whole topic you don’t talk about that totally engulfs your life and, ‘Oh by the way, what have you been doing. How fast did you run today?’ It just seems like our priorities are totally different. You are still friends, but something has definitely changed there.

Before having children, Olivia was in good physical shape. She now envies other people when she sees them engaged in the types of activities she undertook prior to having Maggie. It is difficult for Olivia to accept that her fitness level has changed.

I see my friends are, like my one friend who has no child, traveling to South America, and doing this, and running this race and you know, sometimes I think, ‘Wow, I got out for a walk or I took one yoga class this whole week. That is so awesome.’ But I am definitely not in the shape I was before I was pregnant. . . . That is kind of hard to accept.

Although difficult to accept at present, Olivia is confident that in the future she will be able to return to her previous active lifestyle when time permits.

*Stories of New Normal*

For Olivia, the transition to motherhood was filled with unfamiliar emotions, challenging experiences, and shifting values. Looking back, she recognizes that her life prior to children lacked direction. In certain parts of her life she experienced a sense of mastery, yet there was hollowness to her accomplishments. To Olivia, there was no ultimate goal or purpose to what she was doing. Having children brought a welcomed sense of meaning to her life. In Olivia’s words, “it just feels so right”.

It has totally changed in overall a good way I think. Before kids I think I was totally aimless. Like I was really good at doing some things and if I was really good at doing them I would just go and do them. It wasn’t like I had any real purpose or goal or anything. I would think, ‘This is really fun and I am really good at doing this and people like the job I am doing, so let’s just go with it’ . . . . But you know after having kids it is like, um, I don’t know if it gave me purpose, but it just feels so right. To be able to see these people that you have raised, taught, held and just the relationship between my daughters and I, that is what is important.
Having children has created a greater sense of awareness about the world. Olivia is more conscious and concerned about the future and what life will be like for her children.

Thinking about how the world is going to be for them has totally changed me. In the way I think about the world a lot, because I never worried so much about what the world is going to be like in 12 years or whatever. I didn’t actually even care.

Although Olivia experienced dissonance with her perception of being a homemaker and then actually becoming one, she now embraces it. Olivia has redefined her role in the home. Her redefinition and increased comfort with the label of “homemaker” has had a profound impact on her ability to engage in the role of a mother.

I really have embraced it, like everything, since Naomi. And it is just so weird. I hated cooking. It is completely different now with our second daughter. I am making my own bread. Crazy stuff. I never would have thought that I would do those things. I think it is really neat and I like it and I wish I had more time. . . . It just seems so bizarre but it is fun. So, it is really neat because I think I have allowed myself to not hate it or not think that it is dumb. It is good. It is fun. It’s weird, because I guess that was my goal in the beginning, was to be a homemaker, whatever that was, and maybe I started off with a stereotype of what that was going to be and I didn’t like that. Now it has finally come to what I actually want it to be without all the labels and stuff. Like, this is what I want to do.

After four years, Olivia has become a confident mother. Having forged through difficult transitions and stressful experiences, Olivia is proud of her ability to be an effective mother. She is especially happy that she has been able to nurture strong relationships with her daughters, something that she did not have in her relationship with her own mother. Today, Olivia feels grounded with clear priorities for her future.

Now it is great. Um, yah, the times that I think about it, I think, ‘Man, everywoman should experience it.’ It has been awesome. I never really had a very good relationship with my mom and uh, it makes me feel really good too because I think I am forming really good relationships with my daughters. Yah, it makes me feel so, validated as a person. I guess, because the kids are turning out well. I think, ‘Yah. I can do something really great.’ I think I am good at it, so it makes
me feel really good. Yah. So, it has definitely grounded me way more because I think I have my priorities straighter, because I know what has to be done.

Becoming a mother has added value to Olivia’s life. Through her experiences as a mother and her new role of being at home with her children, she has become more aware of her needs, her likes and dislikes, and who she is as a person. She is also better able to self-reflect on her emotional states.

I think that people always said, ‘Oh, you seem so calm or so patient.’ I never felt it because I felt really scattered all over the place. When it came down to it, I really am. So I realized that that is kind of my nature, that I am patient. And I am actively realizing that as chaos ensues around me. I am pretty calm. This is good. I can handle a lot of stuff going on. It is kind of neat to realize more about the way I react to things and that it is a good thing I guess. . . . It really makes me think about how I interact with people and why am I mad about this. It really makes you think about your goodness as a person.

Olivia has learned to embrace parts of her that she was previously uncomfortable with. Through introspection and self-awareness, she feels reassured in knowing and accepting who she is becoming as a mother.

I was always a closet organized person, but I never really liked that or embraced it. And yah, since becoming pregnant and having kids, I am super organized and I really like that feeling. So it has kind of allowed me to, kind of, embrace the really anal part of me in a good way. . . . I guess it has brought clarity to a lot of, or self-awareness maybe. I think, ‘Oh wow, I really am like this and it is okay.’ Maybe I have become more introspective of myself. Yah, which is kind of good in a way, because then you realize finally this is who I am and I am okay with that.

Although Olivia has learned many things about herself, one of the most significant is her ability to accept others and remain non-judgmental. Her empathy is particularly apparent towards other parents and families.

Just being accepting. Actually I have noticed that the different styles of mothering or parenting, even just between my friends and I feel like I am more empathetic I guess. . . . Coming across other parents who aren’t and who are really high strung about their kids and how they behave or whatever and learning just to not comment on it and not judge, I guess. You realize how easy it is to mentally judge someone thinking, ‘oh god, I can’t believe you are letting your
kid do this, or whatever.’ You don’t understand until you are in it. I think it has made me more open about that and just accepting.

At the time of the interview, Maggie was 4 years old and Naomi was almost 18 months. It was during the last few months that Olivia’s vision of motherhood and the reality of being a mother have aligned themselves. She now knows that this is what she had always wanted.

I feel really good about things right now with Naomi walking. I feel like I finally realized what my intention was at the very beginning when I said, ‘I want to have kids and I want to stay at home and raise them.’ And now I finally feel like this is what I was talking about at the very beginning and it is happening and it is all good.
CHAPTER V

Discussion

This inquiry provided four women the opportunity to tell their rich, emotion-filled stories of becoming a mother after 35-years of age. The project also provided me, the researcher, with the opportunity to share my story, and thus gain a better understanding of my own transition into motherhood. I feel privileged to have had the opportunity to hear and write these women’s stories of transition into motherhood.

From the participant stories, I have drawn commonalities and differences that add to the understanding of these women’s narratives. The stories provide insight into their individual experiences in regards to mothering discourse, choices, emotions, identities, values, challenges, and heightened awareness throughout their experience as mothers. This next section will present five “narrative threads” (Clandinin & Connelly, 2000) that in different ways run through each of the stories.

Stories of Should and Shouldn’t

In each story participants described times in their transition to motherhood when they believed they “should” or “shouldn’t” be feeling or thinking a certain way or engaging in a particular mothering activity. These stories reflect the lack of agreement with their lived reality and what they believed a good mother should do or be. The combination of the good mother (Boris, 1994) and intense mothering (Hays, 1996) ideologies in Western society have created expectations that, for some women, are almost impossible to meet. Women are expected to be stay-at-home mothers who are willing to selflessly embrace, and find complete fulfillment, in all aspects of mothering activities (Boris, 1994; Hays, 1996). Intense mothering recognizes women as natural mothers who should be able to immediately and innately care for their offspring.
According to this ideology, mothers should be more than fulfilled and overflowing with joy, allowing them to fully and selflessly invest in a self-sacrificing motherhood lifestyle (Hays). Women should only encounter positive and fulfilling experiences as mothers, with any negative emotions, thoughts, or occurrences considered unnatural (Marshall, 1991). Some mothers who adopt or internalize this ideology use the words “should” or “shouldn’t” in their self critique of their mothering choices, behaviours, emotions, and thoughts (Shelton & Johnson, 2006), as their lived experiences do not align with the good mother ideology. In what follows, I highlight various discrepancies between the participant’s lived experiences and the good mothering ideology, including experiences with breastfeeding, the domestic role, mommy-baby groups, physical changes, and lifestyle changes.

Breastfeeding. Breastfeeding has shifted from the realm of medicine and science to the realm of morality for women (Lee, 2008). Both research and medical discourse maintains that breastfeeding is optimal for the health of the baby and plays a significant role in maternal bonding (Lee). However, infant feeding, which once existed as a choice between formula/bottle feeding and breastfeeding, has now become a directive (Knaak, 2005). Breastfeeding is one of the expectations of intensive mothering (Knaak, 2005; Lee). A woman who adopts this expectation and then does not fulfill it (either by choice or inability) may experience anxiety about the baby’s health, worry about mother-child bonding, and uncertainty about her maternal identity, ultimately leading to intense feelings of guilt.

The stories of breastfeeding were salient in Grace and Olivia’s narratives. Olivia experienced difficulty breastfeeding after the birth of her first daughter. She questioned her innate ability as a mother because she felt that breastfeeding was supposed to be a natural mothering behaviour, but in her case, she found it very difficult. Olivia condemned herself for
not being able to be the mother she wanted to be, suggesting that a good mother “should” be able to breastfeed her baby. Although the choice to exclusively formula feed after two months led to a content baby and mother, Olivia experienced many months of guilt. Social situations became difficult as she worried how others would view the formula and bottle feeding, so much so that she became secretive about her feeding choices. Grace had difficulty with breastfeeding, as her daughter was never able to latch properly. She was constantly supplementing and found herself exhausted emotionally and physically. She worried about her emotional connection with her daughter and the nutrition her daughter was receiving. Feelings of inadequacy and guilt permeated these experiences for both Grace and Olivia.

Domestic role. When Grace and Olivia became mothers, they quickly adopted the belief that it was their responsibility to maintain all aspects of the household. Attending to domestic duties became a source of dissonance for the women. They knew their husbands did not expect them to “do it all”, yet still believed that they, as women, “should” be the ones doing it. Olivia, in particular, felt incompetent when she could not keep up with the daily tasks in the house. Both women devalued the domestic role and did not envision it as part of their lives as mothers; this added to the inconsistency between their expectations and their reality.

Mommy-baby groups. Grace felt isolated as a mother and decided to attend a number of mother-baby groups. These situations became incredibly anxiety provoking, leading Grace to question her status as a good mother. She believed that she “should” enjoy the gatherings and receive pleasure from engaging in conversation with mothers about babies and motherhood; Grace soon learned, however, that she did not want to talk about her daughter and compare her with the other children. Similarly, when deciding to return to work, Grace felt guilty for choosing
to work instead of staying home with her daughter full-time. A good mother is supposed to be self-sacrificing, so how could she possibly want to return to work for her own interests?

*Physical change.* The stories of should and shouldn’t resonated in both Marie’s and Grace’s experience of physical change. Both women had been proud of their physical bodies, and thus had difficulty accepting the irreversible changes that occurred during pregnancy, childbirth, and age. Grace, in particular, felt that she “should” be able to embrace her changed body, as it was her body that produced a beautiful child. Grace struggled because she did not think she was entitled to have negative feelings associated with physical changes following childbirth.

*Lifestyle.* The changes in participants’ freedom, spontaneity, and lifestyle, left Marie, Grace, and Olivia longing, at times, to return to their pre-children life. However, this created a conflict as they felt they “shouldn’t” feel that way or “shouldn’t complain” about it because they had already enjoyed extensive time without children in their lives, and a good mother was supposed to be fulfilled by being a mother.

The women in this study all shared at least one story where they experienced dissonance with a particular aspect of motherhood. They anticipated being good mothers, yet at times questioned their thoughts, emotions, and behaviours, thus resulting in dissonance. In 1957, Festinger introduced the theory of cognitive dissonance. The theory holds that individuals experience emotional discomfort when confronted with two contradictory cognitions simultaneously. In an attempt to reduce this discomfort, people are led to alter one of the cognitions, ultimately, reducing the dissonance and creating consonance. In an attempt to tighten the predictability of the theory of cognitive dissonance, Aronson (1968) proposed a revision called the self-consistency interpretation. He suggested that it was the inconsistency between the
self-concept and a behaviour that evoked dissonance. Therefore, individuals would “experience dissonance when they behave in a certain way that they view as incompetent, immoral, or irrational” (Harmon-Jones & Mills, 1993, p. 14). At times, the women in this study felt inadequate, irrational, and incompetent as mothers when compared to their pre-child expectations leaving them feeling guilty and frustrated.

Stories of Readiness

Each of the women shared their story of becoming a first-time mothers at 35-years of age or older. Their narratives of life prior to having children were rich in adventure, success, career development, personal growth, and strong relationships. The plots of their narrated lives, to that point, led them to believe they were physically and emotionally ready to have children.

Becoming a parent is considered one of the fundamental expectations of adulthood (Erikson, 1968). A decade after Erikson’s work changes in social institutions, including career-building, family, and educational expectations impacted the timing of the developmental stage of adulthood (Hirschorn, 1977). This resulted in an additional stage to what Erikson proposed, one that involves preparation for parenthood and includes both relational and financial stability (Sheehy, 1995, Wilkie, 1981). The trend to delay parenthood is impacted by demographic, medical, political, and economic factors (Garrison, Blalock, Zarsi, & Merritt, 1997). For women, in particular, the drive for education attainment and labour force participation has also influenced the delay in parenthood (Garrison et al.) “The postponement of parenthood may be related to pursuing opportunities for self-expression and fulfillment in one’s own occupation” (Dion, 1995, p. 316). Women not only identify education, career, and financial stability as factors for delaying parenthood, but also psychological readiness, quality of relationship with
spouse, and lifestyle factors (Dion). The narrative thread *Stories of Readiness* is about the women’s preparation to have children as later-aged mothers.

Each woman revealed aspects of her life that she believed were important to fulfill, complete, or negotiate before having children. Both Grace and Olivia described wanting to be more responsible and mature before embarking on parenthood. When Marie and Grace were in their 20’s they were focused on, and completely engaged in, their spontaneous, adventure-filled, carefree lifestyle. Within the women’s narratives they also expressed the value of completing post-secondary education, becoming financially independent, owning a home, traveling, developing a strong career, and gaining a better self-understanding.

Although Grace, Marie, and Cassandra shared stories of notable achievement before having children, of equal importance was becoming involved with the “right guy”. After having lived many years enjoying independent lives, meeting someone who matched their criteria of the “right guy”, significantly increased their desire to have children. Finding a suitable partner before beginning a family appears to be salient narrative for some Canadian women. McMahon, (1995) in her qualitative study of mothers in working and middle social classes, highlighted the stories of the middle-class mothers who, on an average, were 35-years-old at the time of the interview. Their narratives described the importance of having a partner with whom they believed would be a great parent to their children. In general, this was not as relevant for the younger, working class women. Similarly, the older women in Dion’s (1995) qualitative research highlighted their interest in having a strong relationship with their spouse as a reason for delaying motherhood. This was not identified as a priority for the younger mothers in the study. In the present research, the combination of personal achievements, values, relationships, and appropriate timing influenced the decision of participants to become later-aged mothers. It is also
important to note that Cassandra and Marie both experienced difficulties with their natural fertility, leading them to rely on in vitro-fertilization (IVF) to achieve viable pregnancies, thus further delaying motherhood.

Prior to having children, Grace, Marie, and Olivia were focused traveling, building their careers, and developing their sense of self. Grace, in particular, began to have physical and emotional desires to have children as she entered her 30’s. Before meeting the man who would eventually be her husband, she chose to position her life to be ready to have children. Grace focused on improving her physical health, and gaining employment to qualify for paid maternity leave. She quit smoking, attempted to become as physically fit as possible, and acquired a fulfilling career that would provide her with the employment stability necessary for maternity leave.

Cassandra’s story of becoming a later-aged aged mother differed slightly from the others, as her sole focus before having children was on building a successful career and financial independence. After accomplishing this, her desire to have children increased. It was not until age 35, when she married the “right guy”, that Cassandra’s desire was fulfilled.

Stories of the Mother Stereotype

This narrative thread highlights the participants’ challenge with the personally constructed stereotypes of a mother or homemaker. This finding is consistent with the contradictory themes found in Weaver and Ussher’s (1997) qualitative study of 13 first-time mothers between the ages of 24 and 34-years-old. The narratives from the semi-structured interviews identified the women’s feelings of resentment and resistance to being labeled and stereotyped as “just a mother”. In general the women defined this “just a mother” stereotype as women with little intelligence and interest, who are consumed by her children, and living without
a past. The women in Weaver and Ussher’s research expressed a deep resistance to this stereotype; however, at times their narratives identified with the stereotype, leading to contradictions and resentment. Shelton and Johnson (2006) identified a similar resistance towards the stereotypes in the narratives of older mothers, as well as, the undermining of the stereotype.

This thread was particularly prominent throughout Grace’s narrative. Prior to having her daughter, Grace had an image of a stereotypical mother that was contrary to the way she envisioned herself as a mother. Although ashamed to have even developed such a negative depiction of motherhood, she found herself becoming one of “those moms”. Grace’s image included mothers who, generally, were not overly concerned with their physical looks, had become engulfed in their children’s lives, were boring, and had essentially “lost themselves”. Having become a mother in her 30’s, Grace had years of interactions with mothers who portrayed this image, an image that she completely rejected. She also had years to develop her expectations of who she would be as a mother. Grace attempted to resist internalizing the stereotype; however, the magnitude of her dissonance, and thus her emotional discomfort, increased as it became apparent she was coming to resemble a stereotypical mother. Her statement, “I have gone to the other side” captures Grace’s struggle and resistance to becoming the stereotypical mother she frowned upon prior to having children. During these times Grace felt isolated, lonely, resentful, and confused about her identity.

The stories of stereotype were also present through Grace’s experience with role redefinition. During her year of maternity leave, Grace had imagined a life of freedom. She did not anticipate the extent to which she would feel pressure to adopt the domestic duties. Believing that she should be maintaining the household, including cleaning, laundry, and making meals
became stressful for her. She felt an incredible pressure to maintain the home. Grace was
distressed through the dissonance between what she had expected to be doing and feeling about
motherhood and the reality that she was living. She realized that her resistance or conflict with
this role redefinition intertwined with her experiences of her own mother who she believed was
forced into being a “housewife.”

Olivia’s plan had always been to stay home with her children; however, she soon realized
that life as a stay-at-home mother involved the pressures of the domestic duties, which she
associated with a stereotype of a homemaker. Before having children, Olivia had constructed a
negative image of homemaker. Once a mother, Olivia felt that maintaining the household had
automatically become her sole responsibility. This left her feeling surprisingly frustrated and
resentful. For many years prior to having children, she and her husband had shared the domestic
routines, and anticipated that this would remain the same once she had her daughter. Upon
having a child, however, Grace realized that she had never valued the domestic role and now
found herself engulfed in it. As a result, she experienced both internal – and external – conflict.
For a period of time, becoming a homemaker led to feelings of resentment towards her husband
who was able to maintain his career and social life. Grace was confused and annoyed that it was
different than expected. The incongruence between her actions (fully involved in the domestic
role) and what she believed or valued (shared role) caused the dissonance. Having not
anticipated these particular negative emotions amplified Olivia’s dissonance.

Although not as salient in her story, Cassandra too expressed a conflict regarding
becoming her version of a stereotypical mother. Having spent many years of her adult life
traveling the world and living an extraordinary lifestyle, she expected to maintain the unique
lifestyle she had been living with her son at her side. She was surprised to become a “soccer
mom”, yet chose to participate in activities that she had loathed before having a child. In essence, she put the needs and desires of her son before her own antipathy towards her long-held stereotype of motherhood.

The women in the current study had many years to develop their stereotypes, values, beliefs, and an image for themselves as mothers. Before having children, these women believed that they could resist becoming a stereotypical mother. This, however, is not what transpired for Olivia, Grace, and Cassandra. Through their transition into motherhood, they initially challenged their previously developed motherhood stereotypes; despite this, there was a time, however, when these three participants began to resemble the stereotype. This experience resulted in resentment and dissonance due to the inconsistency between who they did not want to be and who they were becoming.

*Stories of Identity Confusion*

The experience of becoming a mother created questions about what they had come to know about themselves during their childless adult years, prompting unexpected and unfamiliar emotions, behaviours, and thoughts. The women’s identities were challenged as they transitioned into motherhood. The feeling of loss of aspects of their former lives was salient. It is during times of identity crisis that one engages in deep self-exploration and self-analysis (Erikson, 1968). Any role redefinition could present a possible cause for an identity crisis. Many years after Erikson’s work, Polkinghorne (1991) presented the formation of self or identity through a narrative theoretical perspective. In this view, the self is constructed from the unity and coherence of stories of temporal events. The result of the construction of these events is an operating plot. This is what an individual knows about how they have reacted, emoted, and behaved in the past and provides an understanding of herself. A disintegration of the self-identity
may occur when an individual has reactions, thoughts, emotions, behaviours, or events that diverge from the previous plots and prior self-knowledge (Polkinghorne). Difficult life situations or stress, including major developmental events, may challenge the operating plot from which an individual has come to know him or herself (Polkinghorne). The women in the current study described experiencing a role redefinition during the transition into motherhood, which challenged their identity and caused heightened self-awareness.

The experiences of identity confusion were interconnected with loss for the women in this study. They felt they had lost parts of who they were and how they expressed themselves. Nicolson (1999), in her study of 24 women during the first six postpartum months, connected the women’s description of depression with loss. Women described various losses including loss of autonomy, occupational identity, relationships, time, and physical sense of self. Similarly, the women in this current study highlighted losses of freedom and spontaneity, physical identity, friendships, worker identity, relationships, emotional identity, and sense of self. For a period, these women struggled to find congruence between their childless selves and their experiences of motherhood. During their 35 years or more without children, the women had created a strong narrative identity. Their experiences as they transitioned into motherhood left them feeling confused about who they were and saddened by losing parts of their former selves.

The experience of identify confusion was prominent in Marie’s story. Before having children, Marie described herself as physical, confident, ambitious, adventurous, and carefree. At the time of the interview, Marie struggled to articulate her identity as a mother. She described a lack of confidence in her career, her ability to form opinions, her ability to make decisions, and ultimately, her direction in life. Throughout her life before becoming a mother, these aspects had become strong parts of what she knew about herself. Prior to having children, Marie had
developed a strong worker-identity. She had become a successful journalist on an “upward trajectory”, but upon becoming a mother felt that she could not be as ambitious. For Marie, the reality of being a part-time working mother reduced the possibility of career success. Marie’s worker-identity was challenged upon her return to work, as she felt expendable, unappreciated, and unvalued. She encountered similar challenges in her personal life as she felt a lack of confidence with decision-making, forming opinions, and at times, with social situations. At the time of the interview, Marie expressed disappointment as she had anticipated that motherhood would have immediately added to her identity; however, the experiences and emotions associated with becoming a mother left her feeling “shattered”, “fractured”, and “discombobulated”.

All four women described much of their adult lives filled with freedom to travel and a high degree of spontaneity before having children. The responsibility of motherhood and their commitment to routines reduced their ability to be impulsive and adventurous. Grace was able to maintain most activities of her childless life until the day she gave birth to her daughter. However, she felt unprepared for the quick and drastic changes that would come once she had a child. The associated emotions of resentment, confusion, and dissonance were all unfamiliar to Grace. At times, Grace, Marie, and Olivia all felt sad for the loss of their prior freedom, leading them to yearn for their former childless lives. Dissonance ensued as they felt they were not entitled to have these contradictory thoughts and emotions about motherhood. A good mother should be fulfilled by the activities of motherhood (Hays, 1996), and experiencing and expressing negative emotions is unnatural (Marshall, 1991).

Marie, Grace, and Olivia shared similar experiences with their difficulty accepting the change in their physical body. Marie and Grace, in particular, had been able to rely on their
physical abilities and expected a certain physical shape well into their 30’s. These two participants had also used their physical appearance to construct a sense of self, which is described by Finkelstein (1991) in his book, *The Fashioned Self*, as a way in which women define themselves. After having children, the women had difficulty altering their expectations about their physical ability, and appearance, ultimately challenging their identity. At the time of the interviews, the three women felt a sense of loss as they had difficulty finding the time and/or energy to participate in activities since having children. For Marie, this was particularly difficult as her physical health was intertwined with her emotional well being, leaving her both physically and emotionally heavier than she was used to.

In addition to these losses, Grace and Olivia were confused with their shift in social identity. Not only did they lose the freedom to participate in the activities they once enjoyed, but they also missed the social component associated with such activities. At times, Grace felt lonely and isolated. She attempted to fill this void by joining mother-child groups, but this led to a greater sense of loss as she had difficulty relating to the other group participants. For Grace, the losses led to feelings of anxiety, loneliness, sadness, and lack of connection, which were feelings that were both unfamiliar and uncomfortable for her. Grace, Olivia, and Cassandra all described stories of losses of friendships once they had children. These friendships were with women who did not have children, creating a difference in priorities, time constraints, and ability to connect.

Olivia’s identity as a mother was challenged during the redefinition of her role within the home. Olivia simultaneously engaged in the domestic role and devalued it; doing so led her to an extremely low sense of self-worth. Although Olivia wanted to stay home with her children, she felt “totally useless” as she did not feel accomplished on a daily basis with the perceived menial tasks of maintaining the home. This was difficult for a previously confident, self-assured, and
goal-directed woman. Once again, feelings of dissonance were salient in Olivia’s stories of identity disintegration and transformation.

During the first few months of her son’s life, Cassandra experienced surprising anxiety about her mothering ability. Although she had taken extensive measures to prepare for motherhood, Cassandra constantly felt anxious and worried about her ability to attend to the needs of her son and his health. This was contrary to her prior identity and knowledge of self, in which she viewed herself as competent, confident, and always prepared. When her son was about 6-months-old, she realized that by decreasing her expectations to be a good mother, her anxiety and worry would subside. Cassandra’s narrative supports findings from Knaak’s (2009) recent study focusing on mothers who fit a continuum of postpartum emotional distress, from mainly happy to clinically depressed. Mothers who reported less difficulty transitioning to motherhood had placed reasonable expectations upon themselves and believed they were completely ready for the baby (Knaak). However, the opposite was also true. It is plausible that this was the case for the participants in the current study who shared stories of negative emotions. Perhaps these women had more difficulty with the transition as they felt they should have been ready, and had placed higher expectations on themselves to be able to handle the changes once they became mothers.

Cassandra experienced a final challenge to her pre-mother identity when she felt overwhelming guilt and anxiety about leaving her son for the extended periods required for her job. Once again, this experience challenged her previous emotional-identity, as the magnitude of the feelings was unanticipated and unfamiliar. She immediately changed her job, ultimately reducing the guilt. Unlike the other participants, Cassandra did not express a feeling of loss toward her former life. She did, however, described a change in her lifestyle. Her strong
statement, “he (husband) didn’t crush my spirit. Not until later my child crushed it for me”, suggests that at one point she became aware of the realities of motherhood, that for her included a change from focusing on herself and her own goals to making decisions based on the happiness of her son.

There are times when an individual’s experience shatters the previous life narrative leading she or he to “experience the profound insecurity, self-doubt and inner conflict which we associate with anxiety” (May, 1967, p. 1). Role attainment during the transition into motherhood produces enormous change for a women’s identity (Rubin, 1984). So much so, that “from onset to its destination, childbearing requires an exchange of a known self in a known world for an unknown self in an unknown world” (Rubin, p. 52). The concept of loss is also an integral part of the Stories of Identity Confusion thread. Not only did the women in the current study describe losses, they also shared stories of associated negative emotions, confusion, and dissonance. Their previous operating plot and what they knew about themselves before having children did not align with their experiences, emotions, and reactions upon becoming a mother.

Stories of Something New

Although all four participants described experiences of loss and significant change upon becoming mothers, their narratives also included stories of incredible growth and gain. Having spent over 35 years prior to having children constructing a strong identity, they were acutely aware when things began to change in their lives. For a time, there were challenges, confusion, and dissonance; however, through this each woman expanded her self-knowledge and understanding.

The women in this study shared contradictory stories of negative and positive emotions, reactions, and experiences. At times, these emotions and experiences were competing with each
other creating a conflict or dialectic. Dialectic is “a contradiction-ridden, tension-filled unity of two embattled tendencies” (Bakhtin, 1981, p. 272). A working-mother may experience the dialectic nature of motherhood with the competing tendencies of her work and mother roles (Johnson & Swanson, 2006, 2007). When a mother moves closer toward her worker identity (participating in career development or success) she will experience a pull towards her intensive mothering (feeling like she needs to be home with her children) and the opposite is also true. The results are dissonance and emotional discomfort until the woman is able to renegotiate her cognitions (Johnson & Swanson). The process of reframing one’s thoughts reduces the emotional discomfort that results from the dialectic or dissonance. For example, a mother who initially feels incredible guilt for sending her child to daycare may begin to feel less guilty when she views the daycare as being extremely beneficial for the development of the child.

Whereas the previous thread highlighted the more challenging or negative experiences of the women in the study, this thread focuses on the positive and fulfilling experiences of later-age motherhood.

Each of the participants described an incredible ability to love more deeply than they had anticipated when they had their first child. It was so strong for Cassandra that she described it as though she “grew another heart.” Both Marie and Grace expressed heightened feelings of joy and moments of amazement as they watch their children grow and develop. The participants also described a surprising increase in patience, a quality for which they are grateful since having children. Both Olivia and Cassandra shared that becoming a mother increased their patience and empathy, not only within their own family, but also in their ability to accept themselves and others without judgment.
All four women described a greater sense of purpose and responsibility in their lives as mothers, which their previous childless lives had not provided. In retrospect, Olivia expressed a sense of aimlessness to her childless life, which has been replaced with increased meaning and a greater sense of purpose. Grace shared that having her daughter gave her a new a sense of purpose. Now, she feels that her life is incredibly important, compared to her previous adventure-filled “selfish” childless life. Grace has become more aware of who she is and who she wants to be. Marie has also become increasingly conscious of her actions and reactions as she realizes the importance of being a role model to her children. Motherhood, for Olivia, has presented her with the opportunity to embrace aspects of her personality that she once tried to repress. Prior to having her children, Olivia had difficulty accepting and expressing her “closet organization”. Since having children, she finds great pleasure and satisfaction with being “super organized”. Becoming a mother has allowed Olivia to appreciate the different parts of her personality.

Having created a definition of homemaker that she is willing to accept, Olivia now embraces this role within her home. She has become a proud and confident mother who can differentiate between her likes and dislikes, and can appreciate the things that she really wants out of life. Rather than being frustrated with the fact that having children has altered her outdoor adventures, she welcomes experiencing nature through her daughters’ eyes. Olivia is starting to have the time and opportunities to regain some of the life and activities she had prior to having children.

Marie has accepted that life will continue to be different every year as her children become older. She looks forward to the day when she will be able to regain aspects of her life that have been missing since having children. However, she is fully aware that these parts of her
life will always be integrated with her identity as a mother. This might include her work identity when she returns to her part-time job, her ability to embrace and enjoy her children, or her confidence in opinions and decision-making.

Since having her son Cassandra enjoys being able to absolve herself from the intense “selfish” childless lifestyle that was driven by career and financial success. Throughout her pregnancy and her year of maternity leave, Cassandra enjoyed the more relaxed nature of being a mother. Although her financial situation required her to return to work, she has been able to find a job that does not require travel, which allows her to be more accessible to her family needs. Cassandra’s experience is similar to some of the pregnant women in Bailey’s (1999) study who embraced the opportunity to shift their focus from their career identity to themselves during the pregnancy and possibly post partum.

Although all four women experienced various challenges and difficult emotions associated with becoming mothers, they also shared stories of greater self-understanding and increased self-awareness. During the transition to motherhood, these women experienced a disintegration of their sense of self. The operating plot that they had developed over the 35 or more years before having children was incongruent with their experiences as they transitioned into motherhood. In the midst of contradictory emotions and unfamiliar experiences, these women became introspective and explored their identities. It is during this time of incongruence that individuals will take the time to evaluate and reflect on who they are. They will make meaning from their stories as a means to regain a sense of identity coherence (Polkinghorne, 1991). Women who become mothers experience a major transformation and reintegration of their identities (Nicolson, 1999; Shelton & Johnson, 2006). Borrowing from Polkinghorne’s theory of narrative identity, it is surmised that later-age mothers proceed through a period of
identity incoherence when they first become mothers, to a place of narrative coherence as they come to integrate and make sense of their changing identity. Becoming a mother at a later age involves a powerful identity transformation.

Practical Implications

The results of this inquiry have implication for practitioners, academics, and mothers. In general, the results provide a deeper understanding and greater awareness of the lived experiences of later-aged mothers. Any person who takes the opportunity to read the narratives of these women will become more familiar with the profound changes and intense emotions associated with a later-aged mother’s transition to motherhood. The dominant good mothering ideology continues to influence the lives of women as they transition into motherhood. A later-aged woman may expect to negotiate her transition into motherhood easily; however, when faced with the realities of motherhood she may experience challenges to her identity and questions about her innate mothering ability. Although the experience of loss is reported among mothers resulting in dissonance and negative emotions, the good mothering ideology suggests that women should not experience or express negative emotions associated with motherhood. This leaves mothers feeling isolated, confused, and consumed with guilt.

The results of this research can help counselling practitioners understand how each woman creates meaning from her experiences as a mother, assisting in relationship building and appropriate counselling practice. Academics will have the opportunity to build from the results of this solid narrative project to further their research on women’s issues. Specifically, this research leads to the following questions about later aged mothers. Does becoming a mother at a later-age differ from becoming a mother at a younger age? Do later-aged men and women
experience the transition into parenthood differently? Are older mothers more acutely aware of the dominant mothering ideologies, making it more challenging for them as mothers?

This research has given a voice to the lived experiences of the four women in this project. My hope is that mothers who have the opportunity to read these rich stories might gain validation with their own experiences, giving them the permission to acknowledge and accept their own struggles within the confines of good mothering ideologies. This project may continue the process of increasing the options of mothering discourses from which to choose.

Limitations to the Research

The intent of this narrative inquiry project was to collect, analyze, and present the stories of four women who became mothers after the age of 31, while upholding the accepted standards of investigative rigour associated with qualitative research. If one were to view the present research from a quantitative research perspective, one would be concerned with the small sample size. However, the quantitative post-positivist conceptualization of generalizability “that gives the researcher the ability to generalize the results from the sample to the population from which it is drawn” (Mertens, 1998) does not fit with the qualitative research paradigm. Instead, the concept of transferability, introduced by Lincoln and Guba (1985), is better suited to judging the validity of qualitative research. Transferability lends the burden of generalizability to the reader through ensuring that the researcher provides enough detailed information and description for the reader to judge the applicability of the findings to another setting. More specifically, generalizability is not the intended outcome of narrative inquiry. Clandinin and Connelly (2000) suggest that if a narrative researcher writes generalizable themes, there will be a loss of the “richness of the narrative experience” (p. 142). Narrative inquiry focuses on the richly textured narratives of the participants, with an aim to honour their experiences as narrated. It was not my
intent to generalize the findings to all later-aged mothers; however, I did attempt to provide detailed information about the study, the methodology, the analysis, and stories of the women in order for the reader to determine the applicability of the research. If I had interviewed more participants, my findings would likely be representative of a greater number of later-aged mothers. A larger sample size may have provided greater depth to the findings; however, proceeding this way would have resulted in an extremely lengthy document that would have less room to fully present the individual narratives.

Another possible limitation of this particular project is the demographic characteristics of the sample. Each of the women in this research was married, had completed at least one post-secondary degree, were at least mid-range in socioeconomic status, and had a successful life before having children. The stories of single mothers, or those from low-income families, however, may be significantly different from those who participated in the current project. Due to the research design, it is difficult to say whether some of the narratives are unique to later-aged mothers. For example, the strong identities of these later-aged women may have created difficulty for them once they became mothers; however, it is not clear if their experience of identity transformation would be different from younger mothers who have not developed a robust sense of self or operating plot.

Finally, it is important to note that these women were born and raised in various regions in Canada. Each of their homes for at least the past 8 years was in Alberta. Interviewing later-aged mothers from various cultures, for example later-aged Aboriginal mothers, might present vastly different narratives based on cultural norms and values.
Future Research

This current research adds to the increasing social science research that explores the experiences of women as they transition into later-age motherhood. Although the present research did not specifically address identity transformation and reintegration of later-aged mothers, themes in this regard were prominent within the participants’ stories. It may be valuable for future research to examine more specifically experiences of identity transformation and reintegration among this population of mothers. It is possible that some of the themes in this project are unique to later-aged mothers. In order to establish a difference between later-aged mothers and younger mothers, a quantitative project could compare variables such as parental guilt, identification with stereotypes, emotional liability, and difficulty with the transition. The results of a project like this would provide practitioners with greater insight about the challenges that some later-aged mothers experience.

The focus of this research was on women who had children after the age of 31. All of the women who participated had completed their childrearing by the age of 38-years-old. Although extensive research has been completed with mothers of varying ages, only a few are specific to a targeted age, making it difficult to compare the differences between later-age mothers in their 30’s or 40’s and younger mothers. I expect there would be some commonalities to the themes across all ages; however, I would also anticipate that there would be significant differences between their lived experiences.

It might also be fruitful to examine the experience of women who become first-time mothers later in life through adoption. Comparisons between adoptive mothers and birth mothers may shed insight into the ways in which mothering discourse influences the cognitive and emotional experience among different mothering experiences.
Highlighted in the stories of the women in the present study are the psychological discomforts associated with the dissonance and dialectic tensions experienced, both of which were in relation to their transition to motherhood. In recent years, numerous studies has focused on postpartum distress or depression (Knaak, 2008; Mauthner, 1999, 2002; Nicolson, 1999); it may be helpful, however, to focus on the low level psychological discomfort that appeared to impact the women in the current project, and how this might be related to the good mothering ideology.

Finally, it would be interesting to study the experiences of men who become fathers at a later-age to determine similarities and differences in first-time parenting among men and women. Comparing the differences between the experiences of men who become stay-at-home fathers and those who continue their careers would also provide insight into a male perspective in a female dominated world of mothering.
Personal Reflections

What started out as a curiosity ended up becoming a journey of personal growth and development in my transition into motherhood. When I embarked on this project, I was feeling confined by the expectations of motherhood that I had internalized. Even though I believed that I would not succumb to the stereotypes, the challenges, and the struggles of motherhood, in the end I found myself living them. I felt lonely, frustrated, and missing parts of who I was. I believed that I “should just get over it” and embrace all the joy and wonderment of motherhood. I believed that society expected me to view my losses as a happy, positive transition; however, at times, I was miserable. I had no idea that I had internalized the good mother ideology.

Throughout this process I have more than resolved the dissonance. Having found my way as a mother has allowed me to not only embrace the positive aspects of motherhood, but to be comfortable with experiencing and expressing the negative aspects. Notably, I experience fewer difficult emotions as I decrease my expectations to live up to the good mothering ideology.

This project has also impacted me professionally. Over the year, I have gained incredible knowledge about the experiences of motherhood that will assist me as a counsellor. Through learning how the dominant good mothering ideology is unconsciously internalized leading some women to experience dissonance, and through learning about narrative identity, I believe I am better equipped with tools to assist women in their transition to motherhood.

This was all made possible by the courage of four women who chose to share their personal stories of motherhood. I am grateful to have had the opportunity to hear their stories and learn from their lives. Thank-you for giving me the opportunity to learn from you and share your stories to assist women with their transition to motherhood.
References


http://www.yorku.ca/arm/aboutarm.html


123


Graduate Centre for Applied Psychology
Athabasca University
Edmonton Learning Centre
Peace Hills Trust Tower
1200, 10011-109 Street
Edmonton, AB T5J 3S8
May 14, 2009

Dear Participant,

This letter is an invitation to participate in a study I am conducting as part of my Master’s degree in Counselling Psychology through the Graduate Centre for Applied Psychology at Athabasca University under the supervision of Dr. Simon Nuttgens. I would like to provide you with more information about this project and what your involvement will entail if you decide to take part.

A. Participant Criteria
   a. Women who had their first child born at the age of 31 years or older.
   b. Women who have a child or children between the ages of 1 and 4 years
   c. Women who feel that they have developed a career of five years prior to having children.

B. Background and Purpose

Over the past twenty years women have been delaying motherhood for various reasons. According to Statistics Canada (Retrieved November 12, 2008), in 2005 almost 49% of babies were born to mothers over the age of 30 years. This has almost doubled since 1985 when 27.7% of births were to women aged 30 years and over. Thus, women are entering into the exciting and challenging world of motherhood much later than their mothers. Some women have taken this extra time to enhance their careers, invest in personal leisure time and develop strong relationships, resulting in a developed identity. The addition of a mothering identity to this already developed sense of self can be full of excitement, challenge, joy, stress, confusion and conflict. Individual interviews will be used to explore the diversity and uniqueness in each of the women’s journey.

C. Procedures

Participation in this study is voluntary. Interviews will start March, 2009. It will involve two separate interviews that will last between 60-90 minutes and will take place in a
mutually agreed upon location. I will focus on your personal stories of becoming a mother at a later age. You may decline to answer any of the interview questions if you wish. Further, you may decide to withdraw from this study at any time without any negative consequences by advising the researcher. The interview will be audio-recorded to facilitate collection of information and later transcribed for analysis. You will have the opportunity to read the transcripts of your interview shortly after they have taken place, in order to clarify or correct any aspects that you feel would add to your story. Once the project is complete you will be provide a copy of the project in its entirety.

D. Topics

Although the interview will be unstructured the following is a list of general topics or questions that will be covered during the interview:

- Describe your experience of exploring and adding motherhood as part of your identity.
- What was your expected experience of becoming a mother on your identity and how does it compare to your actual experience?
- Changes you experienced in your sense of self after becoming a mother.
- Describe any aspects that you have learned about yourself from becoming a mother.
- Challenges to your identity after becoming a mother and the impact of having a career prior to having children.

E. Risks and Confidentiality

In order to maintain confidentiality, you will assign yourself a pseudonym that you feel maintains anonymity. Also, any identifying information will be changed as necessary. The data collected will be kept in a secure location and disposed of in 5 years time. The story that you provide will be used in the write up of this final project and used for dissemination of information at conferences or in journal publications. The final project will be posted in a reading room for online worldwide access through the Graduate Centre for Applied Psychology website.

The proposed research poses little risk of harm to you. There is, however, a possibility that you will experience emotional distress when sharing your story. You will be provided with resources if you are experiencing distress or would like to work through your experiences in more depth.

F. Direct Benefits, Costs and Compensation

There will be no direct benefits, costs or compensation to the participants of this research project.
G. Questions

If you have any questions regarding this study, or would like additional information to assist you in reaching a decision about participation, please feel free to contact me at 403-542-2353 or by email at clarew@telusplanet.net. You can also contact my supervisor, Dr. Simon Nuttgens at 866-916-9653 (toll free) or by email at simonn@athabascau.ca.

I would like to assure you that this study has been reviewed and received ethics clearance through the Athabasca University Ethics Research Board. However, the final decision about participation is yours. Should you have any comments or concerns resulting from your participation in this study, please contact Dr. Simon Nuttgens.

Yours sincerely,

Clare Fewster
Student Investigator
Letter of Informed Consent to Participate in a Research Project

I have read the information presented in the information letter about a study being conducted by Clare Fewster of the Graduate Centre for Applied Psychology at the Athabasca University.

I have had the opportunity to ask any questions related to this study, to receive satisfactory answers to my questions, and any additional details I wanted.

I am aware that the interviews will be audio-recorded to ensure accurate recording of my responses.

I am also aware that my interview may be included in the thesis and/or publications to come from this research, with the understanding that the quotations will be anonymous using the pseudonym that I have chosen for myself.

I have been provided with and understand the general topics and questions that might be covered during the interview.

I have been informed of and understand the risks of participating in the research. I will be asked questions of a personal nature and I might feel uncomfortable talking about some things. I am free to decline to answer any questions that I don’t wish to answer. I also understand that I have the right to end my participation in the research at any time without penalty, and the right to have all personal information kept strictly confidential and anonymous.

I understand that there are no costs or direct benefits as a participant and there will be no compensation to participate.

I have been informed that the project has been reviewed by and received ethics clearance through the Athabasca University Ethics Research Board. I was informed that if I have any comments or concerns resulting from my participation in this study, I can contact Ms. Janice Green, Research Ethics Administrator, Athabasca University by telephone 780-675-6718 or fax 780-675-6722; or my supervising professor Dr. Simon Nutt gens by email at simonn@athabascau.ca, or by telephone at 403-995-2905.

With this knowledge of all foregoing, I agree, of my own free will, to participate in this study.

_____ YES  _____ NO

I agree to have my interview audio recorded.

_____ YES  _____ NO

I agree to the use of anonymous quotations in any these or publication that comes of this research.

_____ YES  _____ NO
Participant Name: _____________________________ (Please print)
Participant Signature: ________________________
Witness Name: _______________________________ (Please print)
Witness Signature: ____________________________
Date: ___________________