



“Nature makes you blind to the risks”: An exploration of womens’ views surrounding decisions on the timing of childbearing in contemporary society



Tina Lavender ^a, Janette Logan ^a, Alison Cooke ^a, Rebecca Lavender ^b, Tracey A. Mills ^{a,*}

^a School of Nursing, Midwifery and Social Work, Manchester Academic Health Sciences Centre, The University of Manchester, Jean McFarlane Building, Oxford Rd, Manchester M13 9PL, UK

^b School of Social Sciences, The University of Manchester, Arthur Lewis Building, Oxford Rd, Manchester M13 9PL, UK

ARTICLE INFO

Article history:

Received 30 April 2014

Revised 23 April 2015

Accepted 24 April 2015

Keywords:

Delayed childbearing

Decision making

Womens’ views

Pregnancy

ABSTRACT

Objective: To gain an understanding of womens’ views surrounding decisions on the timing of childbearing. **Study Design:** This study was based on interviews with 18 childless women, from North-West England, in three age groups: Six women aged between 18 and 24; Six women aged between 25 and 34; and six women aged 35 or more. Data were analysed using a hermeneutic phenomenological approach with thematic analysis.

Results: Three main themes were identified. Women perceived themselves as **living within boundaries**, defined internally and externally; they aspired to **being a great mother or no mother**; and had a **desire to contribute** to family and society, at multiple levels. Risks associated with delaying childbearing had little or no influence on decision-making. The overarching phenomenon was social comparability; decisions were made in the context of women’s knowledge and perceptions of others and a high degree of critical self-evaluation.

Conclusion: We conclude that social reality dominates womens’ reproductive decisions. Whilst the biological reality is that fertility reduces and medical complications increase with maternal age, social discourses deter women from acknowledging this. Medical risks associated with advanced maternal age are undermined by the notion that women can choose when to start a family.

© 2015 Elsevier B.V. All rights reserved.

Introduction

In England and Wales the mean age at first birth increased from 25.1 years in 1988 to 29.8 years in 2012 [1]. Despite a decrease in the overall birth rate during the last decade, births to women aged 35–39 and 40–44 continue to rise [1]. Live births to women over 40 quadrupled from 6519 in 1982 to 29,994 in 2012 [1]. This changing demography is not unique to the UK; in the USA, there has been a 2% annual rise in first births to women aged 35–39 since 1978 [2].

The trend towards later childbearing has raised concerns amongst health professionals because of the association with a range of poor pregnancy outcomes, notably increased perinatal mortality [3]. There is little evidence to suggest that such concerns influence women’s decision-making; a meta-synthesis [4] of qualitative research questioning women’s reasoning and perceptions of delayed childbearing

highlighted the complexities associated with choices around timing. Findings suggested that women were unaware of perinatal risks associated with advancing age; although none of the included studies were UK-based and all focussed on questioning women over 30 years of age. Cooke et al. [5] report a qualitative study of accounts of delayed childbearing in women >35 years. This study confirmed the findings of the meta-synthesis; a multiplicity of factors influence timing of childbearing. In her empirical work, Cooke went one step further by stating that decisions regarding timing of childbearing are often beyond women’s control.

Decisions about the timing of childbearing have been a controversial topic of debate in the lay and professional media [6,7]. Whilst the health community has focussed on issues of safety, the wider public debate has concentrated on the social acceptability of older motherhood [6] and changing gender roles [8]. The social construction of motherhood is a dynamic process, deeply rooted in the social construction of womanhood [9]; women’s biological ability to reproduce has led to an acceptance of the role as dominant child-carer. However, as womens’ lives have changed, the social construction of motherhood has also shifted. In Western societies, an increase in paid-employment [10] and availability of contraception and abortion [11] have increased acceptability of the notion

* Corresponding author. School of Nursing, Midwifery and Social Work, The University of Manchester, Room 4.334 Jean McFarlane Building, Manchester M13 9PL, UK. Tel.: (0044)161 306 7709.

E-mail address: tracey.mills@manchester.ac.uk (T.A. Mills).

of women “choosing” whether or not to become mothers. Nevertheless, the stigma associated with voluntary childlessness remains [12], and motherhood is generally seen as an inevitable part of a woman’s life-course [13]. Society reinforces the belief that women are destined to become mothers; a woman who remains childfree is “abnormal”, lacking a crucial part of her identity [14].

Whilst explorations of the views of women classified as being of “advanced maternal age” provide important accounts for this group of women, narratives across the age spectrum would provide insight into generational views. We therefore conducted an in-depth exploration of the perspectives of three different age groups of childless women to increase our understanding of decisions on the timing of childbearing.

Methods

This interpretive study was guided by Heideggerian phenomenology [15], which aims to capture the “essence” of individual women’s experiences relevant to the particular phenomenon. Here, the perspectives of childless women, across the spectrum of reproductive age surrounding decisions on the timing of childbearing, were sought. Heidegger [15] recognised the difficulties in suspending personal beliefs and experiences; three of the authors of this paper are midwives, all of whom have children, one having given birth over 35 years. Neither of the remaining authors, a social worker and a sociologist have children. No attempt was made to bracket the researchers’ experiences, although the credibility of the findings was enhanced by the use of multiple analysts [16].

Participants

Nulligravid women were included in three age groups: Six women aged between 18 and 24 (all University students; aged 18–24) were included to provide insight into the perceptions of young educated women. Education has previously been suggested as a primary reason for delaying childbearing [11]: Six women aged between 25 and 34 (age 25–34) enabled capture of views from women at an age when they are most likely to begin childbearing [1]. Six women aged 35 or more (age ≥35) represented those defined as being in the category of “advanced maternal age” in the UK. Women were excluded if they were seeking infertility treatment or were caring for a child for whom they were not the biological mother. We also excluded health professionals, as knowledge of age-related health risks may have dominated their narratives.

A purposive sampling strategy was used to target childless women of reproductive age, ensuring that narratives would be meaningful to the topic [17]. Women were recruited from the North West England, UK, initially via personal communications, local networks and university organisations. Following the initial recruitment, snowball sampling was used to access other eligible women. This was particularly helpful for the older age group, who may not have volunteered to talk about a sensitive topic without a personal recommendation.

Data collection

To capture participants’ experiences, in-depth, respondent-led, individual interviews were conducted. Baseline details were collected using a brief interviewer-completed questionnaire, informed by earlier work [4]. A narrative interview approach was adopted [18], commencing with a broad open question, followed by minimal prompts. This enabled participants to articulate what they considered important, rather than being led by interviewer priorities. Interviews took place in a venue chosen by participants, either in their home, University or work place. Interviews were audio-recorded and transcribed verbatim. Contemporaneous field notes

were taken to capture interview nuances. Following each interview, entries were made in a reflexive diary to provide an overall description; an analysis of the interview technique (including researcher–respondent relationship) to document learning points and responses; and record developing themes.

Data analysis

Analysis was guided by the principle of transforming lived experience into a textual expression of its meaning [18]. Within phenomenology, it is proposed that thoughts and language are inextricably linked [19] and therefore interpretation of the narratives provides important insight into beliefs and experiences. To gain this insight and subsequently the meaning of the phenomena, van Manen suggests a reflexive approach, using themes as structures of meaning. Three approaches are detailed; firstly, “wholistic [sic] approach”, considering the narratives in their entirety. Secondly, “selective approach” is suggested, highlighting statements that appear to be significant within the narrative. Thirdly, a “detailed approach” is recommended, considering every sentence or paragraph in detail. Although not explicit within van Manen’s writings, a key component of Heidegger’s approach is the hermeneutic circle, whereby the researcher is encouraged to move between the whole and the parts of the data. This was achieved, manually, by moving within and between individual texts and field notes in a cyclical process.

Thematic analysis provided a means of adhering to the principles of Heideggerian phenomenology. Using van Manen’s three stages, the text was considered as a whole by reading and re-reading the transcripts to achieve familiarisation. Next, sections of text that related to childbearing and age were highlighted in individual transcripts. Other interesting text sections were also highlighted, attached to memo notes to explain the rationale for their selection. Thirdly, each sentence was considered for relevance and placed into clusters, according to commonalities. Sub-themes and main themes were generated through the amalgamation of clusters, after returning to the original transcripts. This process was repeated several times by two authors, independently, before confirming overall interpretation and defining the essential structure of the studied phenomenon with input of the wider research team to ensure that the key messages being conveyed were truthful to the participants’ accounts. The study findings were not returned to participants for member checking; however, to increase the credibility of the interpretation the interviewer summarised the main points of each narrative at the end of each interview.

Ethical considerations

Ethical approval was obtained from Tameside and Glossop Research Ethics Committee (August 2009, Ref 09/H1013/43) and the University of Manchester. Informed, written consent was obtained from all participants. All data were de-identified and electronically password protected to ensure confidentiality. Anonymity was maintained by using pseudonyms.

Findings

Eighteen women participated; 6 in each of the three age-groups. Interviews lasted approximately one hour (range: 23–102 minutes). All participants were heterosexual. Baseline details are described in Table 1. Despite age differences, the main themes were common across all three groups; these were **living within boundaries, being a great mother or no mother** and **the desire to contribute**. Although presented separately, there was significant overlap of themes, highlighting the complexity of the area of investigation. Where differences were noted between age groups, these are highlighted in the text.

Download English Version:

<https://daneshyari.com/en/article/2635594>

Download Persian Version:

<https://daneshyari.com/article/2635594>

[Daneshyari.com](https://daneshyari.com)