

Late motherhood—a matter of choice?

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(Medical Xpress)—When women give birth in their late thirties or in their forties, it is not necessarily the result of a lifestyle choice – putting off motherhood for career reasons or from a desire to "have it all". Nor should they be accused of selfishness or taking undue health risks.

These are among the arguments of psychology researcher Kirsty Budds, whose PhD on the subject of what is commonly termed 'delayed [motherhood](#)' is drawing to a conclusion at the University of Huddersfield.

Kirsty has recently presented a paper on this subject at a conference organised by the British Psychology Society at St Andrew's University, and it generated considerable interest among global delegates.

Her PhD is entitled a "Critical Discursive Analysis of 'Delayed' Motherhood" – and when she shrouds the term 'delayed' in inverted commas, it indicates that she is highly sceptical about the concept.

"I don't like the term 'delayed' because it implies agency and it implies choice," she says.

"It implies that [women](#) who have babies later on are putting something off or waiting for something. I question whether it is actually a choice, but if it is, then it is a choice that is constrained and shaped by the values in our society and the pressures upon women," adds Kirsty.

Norwich-born, she studied for a psychology degree at Loughborough

University, where one of her tutors was Dr Abigail Locke, now a Reader in Applied Social Sciences at the University of Huddersfield and whose own research includes aspects of parenting and childbirth.

Dr Locke is now the co-supervisor for Kirsty Budds's doctoral research, which has included a detailed analysis of newspaper articles that dealt with the subject of older mothers.

"The assumption in newspapers is that women choose to delay motherhood for career reasons, which implies selfishness. "Also, anxiety over women putting careers before motherhood demonstrates the strength of the motherhood mandate - in our society motherhood is considered more important for women than other occupations, such that they should be prioritising it. Furthermore, there is evidence in the media of a resistance to women 'having it all' " says Kirsty.

She also conducted detailed interviews with a number of older mothers but found that this is not how they defined themselves.

Despite a widespread assumption that [older mothers](#) will have a qualitatively different experience than younger women, Kirsty found that in general their transition to motherhood was typical to that of any woman, regardless of age.

There is also extensive media alarm about the [health risks](#) attached to later motherhood, says Kirsty.

"It is almost as if they are saying that by choosing to have babies later these women were choosing to put themselves and their children at risk."

It is still the medical convention to regard 35 as the age at which greater risk is attached to pregnancy, but the risk boundary is probably rising to 40 as later motherhood becomes more normative, argues Kirsty, who

hopes that her research will lead to a more balanced view of late motherhood.

"For a lot of women it isn't a [selfish](#) choice but is based around careful decisions, careful negotiations and life circumstances such as the right partner and the right financial position. These women are effectively responsibly trying to produce the best situation in which to have children, which is encouraged societally, but then they are chastised because they are giving birth when older, when it is more risky".

Meanwhile, she notes, the media has little concept of late fatherhood...

Provided by University of Huddersfield

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