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Validating social support and prioritising maternal wellbeing: Beyond intensive mothering and maternal responsibility

Abstract

In this piece I reflect on the current model of motherhood that prevails in Western countries, often termed ‘intensive mothering’. I will briefly trace the history of this approach, focusing in particular on how theory from developmental psychology has, to some extent, functioned to reinforce it by foregrounding the mother-child dyad and emphasising the importance of maternal practices for children’s developmental outcomes. I will then consider the particular implications of this cultural approach to motherhood upon women’s experiences of motherhood and maternal wellbeing and will conclude by reiterating that we need to continue to challenge this western-centric model of motherhood, which risks both isolating and overburdening women, by highlighting the ways in which both women and children benefit from wider social support systems, yet also by making it permissible for women to access social support without compromising a ‘good mother’ identity.

Keywords: intensive mothering, developmental psychology, maternal wellbeing, social support

“There have always been mothers but motherhood was invented. Each subsequent age and society has defined it in its own terms and imposed its own restrictions and expectations on mothers. Thus motherhood has not always seemed or been the same”

The quote by Ann Dally (1) highlights the socially constructed nature of motherhood, as an institution which is historically and culturally relative. In this piece I reflect on ‘intensive mothering’ (2) as a model of motherhood that is understood as a ‘normative standard’ (3, 1195), in the UK and US, and has been identified within other English-speaking (e.g. Australia, 4) and high income countries (e.g. Sweden, 5). I will briefly trace the history of intensive parenting approaches, in particular as it applies to a UK context, on how theory from developmental psychology has, to some extent, functioned to reinforce it by foregrounding the mother-child dyad and emphasising the importance of maternal practices for children’s developmental outcomes. I will then consider the particular implications of this

approach to motherhood upon women's experiences of motherhood and maternal wellbeing. I will conclude by reiterating that we need to continue to challenge this problematic model of motherhood, which risks both isolating and overburdening women, by highlighting the ways in which both women and children benefit from wider social support systems, yet also by making it permissible for women to access social support without compromising a 'good mother' identity.

In the UK mothers remain the main caregivers despite a steady increase in women's participation in work outside of the home since the 1970s (6, 7) and there are a number of factors that facilitate this pattern. In the first instance, it has been argued that parental leave in the UK is traditionally mother-centred (8), having initially been established for women only in 1975. Paternity leave was not established until 2003, upholding the notion that the mother is the main carer and the father has a secondary role. In the UK this gendered pattern of caregiving remains despite more recent efforts to increase the involvement of fathers in the early caregiving of their children through the government's introduction of the Shared Parental Leave (SPL) policy in 2015. Although policies can take a while to 'bed in', early indications are that uptake of SPL is low at just 2% of eligible fathers (9). Research suggests that there are economic barriers to men taking more parental leave, which are exacerbated by the gender pay gap (10). However, Kaufman (10) found that even in instances where female partners earn more, men don't take up parental leave, yet cite finances as the reason why. This suggests that decisions on parental leave are often still underpinned by gendered parenting norms (10).

In addition to policy developments, recent decades have seen the emergence of the 'involved father' narrative (11) and indeed men discuss wanting to be more involved with their children (12). Positive father involvement has been linked to child wellbeing (13) in addition to maternal wellbeing, at least in families where parents are not separated (14). However, despite declarations of intentions to be involved, it has been found that, following a return to work, temporary disruption to gendered norms of parenting associated with periods of parental leave are undone, with men once again positioning their partners as full-time carers and describing their own role in secondary, supportive terms (12). The underlying causes of these caregiving patterns are not just practical or economic, but ideological, since ideals of good parenthood still position mother as primary carer (12) and motherhood remains tied to femininity in a way that isn't the case for men (15). Indeed, even in the Nordic countries

which are known for family friendly and parental leave policies which aim to promote gender equality, women still emerge as responsible for a larger share of the childcare duties (16, 17). This is significant because of the considerable costs associated with raising children in terms of time, energy and resources. From an evolutionary anthropological perspective, it is considered that as a species we are cooperative breeders and that cooperative childrearing approaches, where women receive help with childcare from others (including relatives and non-relatives), would free women up to invest their energy elsewhere (18, this volume). However, as Sear (19, this volume) argues, despite evidence that cooperative parenting is beneficial, the nuclear family and the emphasis on mothers as main caregivers remains idealised in many high income, Western societies, such as the UK.

Developmental psychology research has reflected, and to some extent, underpinned the inequalities seen in policy and gender ideology. Until more recently, the majority of developmental psychological research assumed families conformed to a nuclear family model which incorporates gendered divisions of labour, and largely, owing to both practical (e.g. convenience – since mothers are more often at home) and ideological reasons, focused on the mother-infant dyad (20). However, this does not reflect the reality of the context in which many children grow up – for example being taken care of (albeit generally less often) by fathers; grandparents or professional childcare staff, and within different familial circumstances. Phoenix and Woollett (21) consider the way in which narrow definitions of ‘normal’ motherhood fail to take into account structural differences between mothers, and consequently positions different groups of mothers and their mothering practices as deviant (e.g. BAME, single, lesbian and working-class mothers). As Burman (20, p. 117) puts it, the nuclear family “continues to lie at the centre of national and international social policy in terms of defining relationships, responsibilities and economic futures” despite the fact that it increasingly fails to represent a typical family structure.

Historically, the perceived importance of the mother-child dyad has been underpinned by influential developmental psychology theory. For example, Bowlby’s work, concerned the impact of maternal deprivation on child development and concluded that for optimum mental health and wellbeing, babies need to experience a close and continual relationship with their mother (or permanent mother-substitute) (22), with a lack of such a relationship linked to psychological problems in later life. Theories stipulating the importance of the mother-infant bond played some part in positioning women back inside the home after their move into

industry during WWII (20), suggesting some direct impact on parenting patterns. Since separation from the mother was considered potentially damaging, this implied that the ‘good’ mother should be continuously available, with implications in terms of specifying ‘who’ should be doing the caregiving – that is, the mother (ideally) as opposed to the father or other carers. Furthermore, more broadly, evidence from developmental psychology research linking poorer child development outcomes to family circumstances resulted in mothers being recruited in a quest to break the ‘cycle of deprivation’ through the application of developmental psychology theory in the home (23) further cementing women’s responsibility for child outcomes.

Not only is the issue that women are required to take the lion’s share of the parenting, but the way in which women are *required* to care has become increasingly problematic. In 1996, Hays outlined the concept of ‘intensive motherhood’ to reflect what she saw as an emerging ideology whereby appropriate or ‘good’ parenting is defined as “*child-centred, expert-guided, emotionally absorbing, labour intensive and financially expensive*” (2, emphasis in original). Hays (2) traces the origins of intensive mothering approaches as far back as the 17th and 18th centuries to coincide with a shift in the conceptualisation of childhood which emphasised children’s innocence and vulnerability. However, she argues that child-centredness, a foundational principle of intensive parenting approaches, became particularly influential in the mid-twentieth century, alongside the importance of maternal affection in response to Bowlby’s work. Today, scholars have noted how the intensification of parenting increasingly includes management of risk, the implementation of expert guidance and adherence to scientific evidence (24) meaning that, as Douglas and Michaels (25) have argued, the ideology of intensive motherhood demands unrealistic and, for many, unreachable expectations of mothers. Intensive mothering foregrounds conservative feminine identities and “redefines women, first and foremost, through their relationships to children” (25, p. 162).

Once more, there are ways in which this particular mothering ideology has been underpinned by developmental psychology. For example, recent advances in neuropsychology were cited as the science behind the UK’s early intervention strategy, which championed the importance of the early years for children’s long-term development and emphasised parents’ roles in shaping their interactions with infants to enable optimal developmental outcomes (26), reflecting Furedi’s concept of parental determinism (27). In practice, owing to gendered

patterns of carework, this responsibility largely rests with mothers. The clear consequences of positioning women as primary carers, and as responsible for children's developmental outcomes, is that if children do display psychological or behavioural problems later in life, the responsibility and blame then lies with the mother. Indeed, there is evidence to suggest that women apportion this blame to themselves (28).

There is now growing commentary on intensive parenting culture and the implications for women's experiences and identities. I would argue that perhaps one of the most pernicious impacts is that, on focusing on the potential benefits for children, the implications for maternal subjectivities are side lined. It is difficult for women to resist recommendations to adopt parenting practices that are said to be in the best developmental interests of their children, even when it could compromise their own interests. It effectively amounts to standing up to 'common sense' – who *wouldn't* want to do what is best for their children? However, as things stand, raising concerns about their own wellbeing or interests at expense of the perceived interests of their children, may amount to accusations of 'selfishness' since they are not in line with the 'good', selfless' mother ideal.

Crucially, a range of studies have highlighted the negative impact of intensive mothering ideologies on mothers' wellbeing (29-32). For example, Liss et al (31) found among mothers of children under 5 that feeling like they were not living up to internalised cultural standards of being a good mother contributed to feelings of guilt and shame. Elsewhere, research has highlighted a consequence of intensive mothering in the shape of women forgoing concerns about their own wellbeing, which may further contribute to parenting stress (28, 29, 33). For example, Guendouzi (29) found that maternal wellbeing and self-needs were subsumed by the perceived requirement to put children's needs first.

In a longitudinal interview study of middle class women's accounts of the journey to motherhood undertaken by colleagues in the UK, although participants were not directly asked questions about infant stimulation or maternal guilt, their accounts spoke to the perceived importance of their roles in ensuring the optimal cognitive development of their infants through providing adequate sensory stimulation. For some of the mothers, the feelings of guilt they expressed when they felt unable to meet these requirements demonstrated that, worryingly, women may feel this pressure even in the early months of their transition to

motherhood (34) at a time when women are still developing confidence in their parenting abilities (35).

Whilst the majority of research into intensive mothering has focussed on white, middle class women, the imperative to mother intensively has been described as transcending class boundaries (2) and is increasingly highlighting the implications of intensive mothering culture for lower income and minority ethnic women. For example, from their interviews with 16 low income Black mothers in the US, Elliot et al. (28) found that within their accounts of good mothering they emphasised the importance sacrifice, self-reliance and protection (e.g. from discrimination) highlighting the components of intensive parenting, to some extent, vary across raced and classed lines. In addition to the impacts on experiences of motherhood itself, the impact of intensive parenting cultures also appear to have an impact on women's reproductive decision making with the perceived requirement to intensively parent seems to be having an impact on women's decisions to 'delay' motherhood (36, 37), highlighting the significant impact it is having on women's self-regulation of their fertility – to only conceive when they feel they can fulfil the role of a good, intensive mother, suggesting the impacts of intensive parenting culture are wide reaching.

As a potential antidote to the pressure of intensive parenting culture, there is evidence that social support plays a key role in preserving women's maternal mental health (38). Studies have found being able to reject or reframe intensive mothering ideals, for example by working outside the home and delegating parenting responsibilities, to be protective of women's wellbeing. From interviews with 40 employed mothers, Christopher (39) highlighted women's construction of 'good' motherhood as 'extensive', rather than 'intensive'. That is, they felt comfortable to delegate caregiving tasks and justified work outside the home in terms of their own needs, thus prioritising their wellbeing. Extensive mothering, Christopher argues, is a more progressive model than intensive mothering, since it relieves mothers from the mandate to spend large quantities of time with children, yet, she concedes, the burden of organising and delegating still tends to fall to mothers. Dow (40) found that her sample of middle and upper-middle class African American mothers seemingly did not feel they needed to account for their work outside of home, which she argues is in contrast to many studies of middle class mothers as they feel impelled to justify an approach which is seemingly at odds with intensive parenting ideology. Instead, Dow suggested that the women in her study were influenced by an alternative mothering ideology,

which she described as ‘integrated mothering’. This ideology emphasises economic self-reliance, work outside the home as a marker of ‘good motherhood’, and access to community and family support for childcare. Crucially, and in contrast to research on white middle-class mothers (2) responsibility for childcare was seen as extending beyond the nuclear family. Participants drew upon a tradition of family and community care of children, which supported women’s ability to work outside of the home.

However, not all women have access to community and familial support for childcare, with recent research in the UK suggesting only one third of families with young children are accessing informal childcare support (41). Elsewhere, it has been argued that women’s access to traditional communities of mothers as support networks has diminished (42). Additionally, research shows that support needs to extend beyond women’s personal relationships as support networks, requiring attention at a structural level. Glass et al (43) found that parental wellbeing was linked to the strength of work-family policies within a range of OECD countries, with parents in countries with more generous or supportive policies exhibiting higher levels of happiness. For those without access to informal childcare, formal settings have the potential to provide much needed support for families. However, in the UK, parents who are not eligible for financial support face high childcare prices. Moreover, recent government initiatives allocating 30 free hours of childcare during the early years have been criticised for catering for working families, whilst families who don’t work or who are on very low incomes will not qualify (44), perhaps sending a clear message about who is deserving of childcare support.

Glass’s (43) research indicates the clear role that the state can play in protecting and enhancing parental wellbeing, making policies to enhance the lives of parents, such as generous parental leave options for both parents and access to affordable, quality childcare, essential. Nomaguchi and Milkie (45) emphasise the importance of measures to improve parental wellbeing to move beyond the individual level. As indicated earlier in this piece, sometimes in spite of structural changes, decisions around caregiving, remain underpinned by gendered norms around who should perform the majority of care work. Indeed, evidence from Nordic countries which are celebrated as world leaders for progressive policies which aim to support gender equality suggests that gendered patterns of care persist and that women in such societies, despite discourses of gender equality, are not free from the pressures of intensive mothering ideology (16, 17). Moreover, such ideologies exacerbate the focus on

maternal responsibility, constituting a further threat to maternal wellbeing. Therefore, alongside structural level changes, gendered discourses of parenting need to be addressed. As Guendouzi (29, p. 908) puts it, “Discourses reflecting and recycling a model of intensive mothering need to give way to discourses that better reflect the reality of modern women’s lives”. However, in isolation this will not be enough. To bolster social change around mothering any challenge to intensive mothering ideology needs to run parallel with promoting discourse about the value of social support and multiple carers in children’s lives (for mothers as well as children). This is essential if we are to dismantle an overarching perspective that the responsibility for childcare and child outcomes rests with the immediate family and mothers in particular. That is, crucially, it needs to be permissible for women to seek support with childcare and prioritise their own wellbeing without it damaging their perceived access to a ‘good mother’ identity. This is important to ensure sharing childcare tasks enhance wellbeing, rather than cause further damage through self-apportioned guilt for not being always accessible. Finally, support should be accessible regardless of maternal employment status. Since the impact of parenting disproportionately affects marginalised women with fewer socioeconomic resources (45), social support, such as access to formal childcare, should be improved for women across the board in an effort to make maternal wellbeing a clear priority.

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