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The 'good mother syndrome' and playgroup: The lived experience of a group of mothers

Bronwyn Harman
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**The 'Good Mother Syndrome' and Playgroup: The Lived Experience of a Group of
Mothers**

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BA (Hons), MA, BA (Psych), Post Grad Dip Psych

**This thesis is presented in partial fulfilment of the requirements for the degree of
Doctor of Psychology**

Faculty of Computing, Health and Science

School of Psychology and Social Science

Edith Cowan University

16th December 2008

USE OF THESIS

The Use of Thesis statement is not included in this version of the thesis.

Abstract

Using a qualitative approach, utilising a semi-structured narrative interviewing technique, I interviewed 21 participants through one-on-one interviews and focus groups to examine how participants experience parenting and playgroup. The good mother syndrome refers to the social, historical and cultural determination of how mothers are supposed to act. It defines what a good mother is supposed to be, subject to political, cultural and economic influences. Further, the good mother syndrome is inextricably linked to challenges to identity, support in the mothering role, and expectations of motherhood. Playgroups are communities of women bounded by internal and external demands, where they support each other via a vehicle that encompasses their children. Playgroups, as part of holistic family services, are important in building social capital. This study asked several questions. Firstly, it investigated the mothering experience in Western Australia in the 21st century. Secondly, this study asked whether the challenge to identity is more salient to first time mothers, and how this is affected by the good mother syndrome. Next, it asked why families attend playgroup, from a mother's perspective. Further, it asked whether mothers are faced with the good mother syndrome at playgroup, and investigated the role that playgroup plays in strengthening or challenging the good mother syndrome. I conducted 11 one-on-one interviews with mothers that attended playgroup in the Perth metropolitan area, and two focus groups, each with five participants, at two different Perth playgroups. This study found that women find the role as mothers a challenging, yet positive experience. Further, it found that challenges to identity were salient with the birth of

the first child, and that these challenges were consolidated with the birth of subsequent children, only easing as the youngest child got older. The women in this study reported that they attend playgroup to develop a sense of belonging, to seek validation in the mothering experience and to claim and exercise expertise. Further, whether the good mother syndrome was challenged or strengthened by playgroup amongst these women depended on group dynamics within the playgroup session, the stage of parenting, and socioeconomic factors. Generally speaking, women can identify what is a 'good' mother and what is a 'bad' mother, but they do not understand the 'good mother syndrome' as an abstract concept. Playgroup, as a community-based Australia-wide program, needs to be recognised as an important contributor to the well-being of families with young children, and, as such, requires ongoing government support.

Declaration

I certify that this thesis does not, to the best of my knowledge and belief:

- i) incorporate without acknowledgement any material previously submitted for a degree or diploma in any institution of higher education;
- ii) contain any material previously published or written by another person except for where due reference is made in the text; or
- iii) contain any defamatory material.

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Contents

Use of thesis	ii
Abstract	iii
Declaration	v
Acknowledgements	vi
Chapter 1: Introduction	1
Researcher Reflections and Background	1
Defining the Good Mother Syndrome	5
The Historical Development of the Good Mother Syndrome in Australia	6
The Good Mother Syndrome in the Twentieth Century	9
Playgroups in Context	11
Australian Government Family Strategies	14
South Australia	15
Tasmania	15
Victoria	16
Australian Capital Territory	16
New South Wales	16
Queensland	17
Northern Territory	17
Western Australia	18
Structure of the Thesis	18
Definitions	19

Family	19
'Good Mother Syndrome'	20
Interviews and Focus Groups	20
Playgroups	20
Chapter 2: Literature Review	21
'Good Mothers'	21
Identity	30
Women in the Domestic Sphere	36
Social Support	41
Playgroup	43
Research Questions	46
Research Aims	47
Chapter 3: Research Approach	48
Researcher Perspective	48
Constructionism x	49
Feminist Theoretical Framework	50
Critical Feminist Standpoint Methodology	51
Research Method	53
Stage One Methods	54
Stage One Participants	55
Age	55
Residence	56
Children	56

Playgroup	57
Education	59
Occupation	59
Cultural and Structural Homogeneity	59
Stage One Materials	60
Stage One Procedure	60
Stage One Analysis	62
Stage Two Methods	65
Stage Two Participants	66
Age	66
Residence	67
Children	67
Playgroup	68
Education	69
Occupation	69
Cultural and Structural Homogeneity	70
Stage Two Materials	70
Stage Two Procedure	71
Stage Two Analysis	73
Rigour	75
Ethical Issues	77
Methodological Limitations	79
Overview of the Emergent Themes from the Data	80

Chapter 4: The Good Mother and the Role of Playgroup	83
Sense of Belonging	85
Validation as a Mother	87
Exercising Expertise	93
Group Dynamics within the Playgroup	95
Stage of Parenting	96
Geographical Factors	99
Negative Experiences of Playgroup	102
Chapter 5: "I'm not that mother": Identity	106
Loss of Identity	106
Feelings of Loss of Power	109
Postnatal Depression	111
Maternal Ambivalence	112
Positive Experiences in Identity Change	114
Chapter 6: "You're damned if you do and damned if you don't":	116
Support	
Isolation	118
Familial Support	120
Perceived Support	125
Chapter 7: "I do feel that pressure": Expectations of Mothering	130
Stay-at-home Mothers Versus Employed Mothers	133
Public Scrutiny of the Good Mother	141
Private Scrutiny of the Good Mother	143
Feelings of Guilt, Frustration and Resentment	145

Unmet Needs	150
Chapter 8: Conclusion	152
Aims and Research Questions	152
Mothering in Western Australia in the 21 st Century	153
The Transition to Motherhood	156
The Good Mother Syndrome and Playgroup	157
Implications for Service Delivery	159
Strengths and Limitations	160
Future Research	161
Conclusion	162
References	163
Appendices	208
Appendix A: Demographics of Participants	208
Appendix B: One-on-one Interview Agenda	224
Appendix C: Letter Sent by Playgroup WA (Inc) to Playgroups Requesting Interview Participants	225
Appendix D: Information Letter for One-on-one Interview Participants	226
Appendix E: Consent Form for One-on-one Interview Participants	227
Appendix F: Excerpt of a Transcribed and Coded One-on-one Interview	228
Appendix G: Focus Group Interview Agenda	235
Appendix H: Letters Sent by Playgroup WA (Inc) to Playgroups Requesting Focus Group Participants	236
Appendix I: Information Letter for Focus Group Interview Participants	239

Appendix J: Consent Form for Focus Group Interview	240
Participants	
Appendix K: Letter to Participants Requesting Feedback on	241
Transcripts	
Appendix L: Excerpt from Researcher Notes Regarding an	242
Interview	

Chapter 1: Introduction

Researcher Reflections and Background

Qualitative research is subjective, and therefore it is becoming progressively more conventional for researchers to explain their rationale for undertaking study (Creswell, 1994; Crotty, 1998; Giorgi & Giorgi, 2003). Further, transparency in the research process increases with acknowledgement of any biases within the research (Meyrick, 2006). Working within social constructionist and feminist frameworks, discussed in Chapter 3, I acknowledge that my values and beliefs, which align with those of community psychology, have influenced this research. Working within social constructionism means that I explicitly shape and co-construct the research process and the findings that are presented (Burr, 2003; Harding, 1991; Lee, 2004; Puig, Koro-Ljungberg, & Echevarria-Doan, 2008; Reinhartz, 1992; Tuhiwai Smith, 2001) and as a feminist researcher it is important that I show how I am socially situated (Aponte, 2003; Cosgrove & McHugh, 2000; Ellis & Berger, 2002; Hertz, 1996; McRobbie, 1991; Peters, Jackson, & Rudge, 2008; Ramazanoglu & Holland, 2002; Stanley & Wise, 1993; Swan, 2008). I have a personal interest in the topics researched, and, in light of this, I recognise that my experiences also subjectively impacted on the way that the research was undertaken. The following section will explain my reasons for undertaking this research.

I joined playgroup and attended my first session in January 1996. At that time, my two daughters were aged almost two years old and three months old. I had decided not to return to paid work until at least the middle of the year, and realised that this meant that I would be alone with two young children for some

time. While I was looking forward to that experience and to being a full-time stay-at-home mother (I had returned to work part-time when my eldest daughter was six months old), I also knew that I would need some regular contact with other adults facing similar triumphs and trials. I also thought it would be positive for the girls to mix with other children. My eldest daughter was cared for by her grandparents while I was working, and, as such, her contact with other children was limited.

That first playgroup session was everything that I thought it would be. I found a group of mothers who had similar backgrounds to mine; they were similarly aged and had similar values, morals and ideals. The children mixed well together, though my eldest daughter was somewhat older than the other children, and I was the only parent with two children, which meant that I was automatically considered the more 'experienced' parent. This all gave me something that I had been missing since my first child was born, an identity.

My involvement at playgroup escalated. I became the President of the playgroup, which, at its peak, had over 150 families as members attending ten sessions per week. It was a position I held for five years, until my third child and I left playgroup for good at the end of 2002. I also represented playgroups on a state level, as firstly the Vice-President and then the President of Playgroup WA (Inc) – the peak body for playgroups in Western Australia – holding the latter position for three years, and simultaneously on a national level as a delegate for Western Australia to Playgroup Australia (Inc). I became a Life Member of Playgroup WA (Inc) in 2004, an honour that, in more than thirty years since its establishment, had only been bestowed on three people before.

Throughout my involvement on a local, state and national level, I always thought about the same things. I wondered why women came, week after week, to playgroups across the country and what motivated them to attend. I often joked that playgroup 'saved me many years of therapy', and when I laughingly repeated this to other playgroup mothers, they nodded their heads in agreement. The main reason that I continued to attend playgroup is that it became a vehicle for forging my new identity, and the social support I got at playgroup was a tool I used to explore my identity and shore it up. These reasons were reflected in my informal discussions with other playgroup mothers, and became the initial basis for this study.

While I found playgroup to be a positive experience, I also became aware that there was a way that I was expected to look and act as a mother, both publicly and privately. I am not sure when I became aware of this expectation. Equally, I am unsure if it was something that I became suddenly aware of, or whether it is something that I gradually became conscious of. From many hours of personal reflection, I think that this expectation of how a 'good' mother is supposed to look and act was instilled in me, subconsciously, long before I actually became a mother. Prior to having children, I thought a good mother was someone who never shouted at her children, because she had endless patience. At that time, I thought a good mother was someone who did not put her children into full time day care (whether for work or study, and certainly not to pursue a social life), but kept the house clean, cooked all meals, and ensured her children – and herself – were as neat and tidy as her house.

It was approximately seven days after the birth of my first daughter that these expectations gave way to reality. I had difficulty breast feeding, and was suffering from a large dose of guilt about my perceived inabilities as a mother. Simultaneously, I discovered that newborn babies do not always sleep: there was an endless pile of nappies to wash (good mothers do not use disposable nappies), along with lots of baby clothes, bottles of formula to make up, and the rest of life to keep up with. Since then, my previous ideals of what constitutes a good mother have gradually been eroded and replaced by my belief today, that a good mother is someone who is doing the best she can for everyone in the family, including herself.

It is against these backdrops of my love of playgroup, and my interest in what constitutes a good mother, that this research has been formulated. When researching the concepts initially, I found several popular books along similar lines exhorting women to overcome what I describe as the good mother syndrome, as defined below (Douglas & Michaels, 2004; Harris, 1995; Maushart, 2000; Schwartz, 1993; Thurer, 1994). However, as stated above, there is a lack of research on who uses playgroup in Australia and why, as well as how playgroup relates to the mothering experience.

The following sections of this chapter describe the core issues of the thesis. Firstly, the good mother syndrome is defined. Secondly, I describe the historical development of the good mother syndrome in an Australian context. Thirdly, I explain how the good mother syndrome has developed in the twentieth century. Next, I describe playgroups, and, lastly, I discuss Australian government family strategies, particularly those that affect families with young children.

Defining the Good Mother Syndrome

Women who choose to remain single and childless are considered abnormal in the community (Choi & Bird, 2003; Hird & Abshoff, 2001; Letherby, 2002; Maher & Saujeres, 2007), and womanhood and motherhood are often seen as synonymous (Arendell, 2000; Chodorow, 1989; Deacey, 2005; Mann & Kelly, 1997; Woollett, 1991). Women who are married, or in a stable heterosexual relationship, are assumed to want to have children; the decisions seem centred not on whether to become mothers or not, but on how many children to have, and when (Aiston, 2004; Arendell, 2000; Deacey, 2005; Gillespie, 2000; Maher & Saujeres, 2007). Feminist writings seem generally dichotomous on the issue of childlessness: while some challenge the limitation of women's identity to procreative and mothering roles, others argue that motherhood is devalued in patriarchal society (Hird & Abshoff, 2001).

As defined below, the good mother syndrome refers to a socially determined manner in which mothers are expected to act, and what a 'good mother' is supposed to be, defined according to society's ideals; 'good mothers', through self-control, self-discipline and self-sacrifice, identify their happiness and fulfilment with their children (Cannold, 2005; Dever & Saujeres, 2004; Hattery, 2001; Marotta, 1998; Raddon, 2002; Smythe & Isserlis, 2004). A milestone study by Wearing (1984) conducted interviews with approximately 150 women, and found that a good mother is described as always available, loving and patient. A research project of 800 Australian women in the 1990s found that a good mother was viewed as one that is caring, patient, and calm and listens to the needs of her children (Brown, Small, & Lumley, 1994). These results are supported by findings from a

longitudinal study of 25 Australian women by Lupton (2000), which shows that, like their 1970s counterparts, good mothers are viewed as selfless, patient, and devoted to their children.

Douglas and Michaels (2004, p. 4) discuss an ideology that reinforces the belief that “to be a remotely decent mother, a woman has to devote her entire physical, emotional, and intellectual being, 24/7, to her children”. Villani and Ryan (1997) cite several myths of motherhood, including the virtues of full time motherhood (as anything less than that will damage the children). According to these authors the myths include the notion that motherhood is instinctive, a good mother sacrifices her own life in order to be loved by her children, and a mother who has needs outside the mothering role is selfish and therefore does not fit the good mother role. However, the idea of a good mother is a mythical standard that is arguably unattainable and self-denying (Villani & Ryan, 1997).

The Historical Development of the Good Mother Syndrome in Australia

The historical development of the ideology of the good mother syndrome in Australia can be traced to colonial times (Deacey, 2005). While some historians maintain that women could be seen as ‘damned whores’ until the mid 1800s (Harman, 1993; Summers, 1975), others suggest that this presumption is not accurate, and denies the fact that many women were valued members of the community (Reid, 2003). Dixon (1999), however, maintains that many women gave birth out of wedlock as a direct consequence of their working conditions and the sexual demands of their male ‘superiors’. In any case, in colonial Australia there was a predominant working-class that lacked moral supremacy (Deacey, 2005; Dixon, 1999), and with this perceived lack of moral order, there was an

increased demand by Australian authorities for 'respectable' families to move to the colonies (Summers, 1975), presumably to instil social order. The focus of these new immigrants was women and children (Roe, 1988), because the "ascribed role of good wife-good mother was deemed essential to promoting a stable model of family life amongst the Australian population" (Deacey, 2005, p. 18).

Child-centred mothering began to emerge as legislative measures for child care and protection increased. Factory Acts introduced in New South Wales and Victoria in the late 1800s reduced the exploitation of children for employment purposes and meant that rather than contribute to the household economically, they became the responsibility of their parents (Sanson & Wise, 2001). The social climate at this time resulted in high proportions of sole mothers, and a lot of children were 'roaming' around who were not in the care of their mothers during the day (Dixson, 1999; Summers, 1975). From early settlement times, abandoned or neglected children, or children of those considered 'socially inadequate' were boarded out with approved families (Liddell, 1993; Sanson & Wise, 2001).

By the end of the nineteenth century, most states had established Children's Courts, legislation was in place to prevent the more obvious forms of child maltreatment, and voluntary organisations such as the Victorian Society for the Prevention of Cruelty to Children (1894) were established (Tomison, 2001). Further, early forms of parent support, such as respite, were beginning to emerge at this time (Liddell, 1993). It was the emergence of these benevolent associations whose primary aim was to address issues considered vital to child welfare – dubbed 'God's Police' (Summers, 1975) – that fundamentally led to the institutionalisation of marriage and motherhood as a way of life for women (Porter, 1988).

According to Deacey (2005), married motherhood was an understated form of social control that would promulgate desired moral standards. While many of the charitably inclined structures that emerged were presented as an opportunity to find 'good homes' for the children of unmarried mothers, this was a thinly veiled social effort to address the problem of morality (Deacey, 2005). It was always assumed that single mothers would not want to keep of their illegitimate child (Swain & Howe, 1995), and this was the beginning of class-based ideology that separated women into 'good mothers' and 'bad mothers'.

By the end of the 1800s, free primary school level education was compulsory throughout Australia (Porter, 1988; Sanson & Wise, 2001), though there were clear assumptions about the future of girls as both a wife and mother or as a domestic servant, as they were taught household duties rather than arithmetic (Carnegie & Walker, 2005; Deacey, 2005; Porter, 1988). Industrialisation meant that gender divisions became more prominent as women were mostly hired within the domestic sphere (Connell, 2005; Higman, 2002; Taylor, 1998). As women's work had less economic value, women became more economically dependent on men (Hannam, 1997). Women became socialised into owning housework, and if women were to work outside the home or engage in charity work, it was made clear that family responsibilities came first (Connell, 2005; Higman, 2002; McCoppin & Gardner, 1994; Schussler Fiorenza, 1987).

By the end of the nineteenth century, mothering was assumed to be the primary identity for adult women, and womanhood and motherhood were seen as synonymous (Arendell, 2000). This movement towards compulsory education therefore served two purposes: it ensured social control of the masses and readied

females for their presumed role as a wife and mother. Further, the dominant ideology ensconced traditional feminine roles as central to social and moral order (Summers, 1975). Politically, pro-natal government involvement in issues such as contraception, abortion and child welfare was established through various Royal Commissions, such as the 1903 New South Wales Royal Commission on the Decline of the Birth Rate (Reiger, 1985). At the same time, the growing importance of the media in Australia saw a reinforcement of the good mother syndrome, whereby advertising and popular literature promoted the concept of the mother at the heart of the family, attending to her family's needs, without concern for her own needs (Deacey, 2005; Pascoe, 1998).

The Good Mother Syndrome in the Twentieth Century

In 1907, the concept that women stayed home and men were the breadwinners was further entrenched with the adoption of a basic wage for men, which was the minimum paid to all men in the Harvester Judgement (Higgins, 1907), while women were often paid less, even if they were doing the same job (Connell, 2005; Reiger, 1985; Roe, 1988). As such, Australia was one of the first societies to use its pay structure to endeavour to keep women in the home (Kingston, 1977). Such political intervention to confine women to domestic duties and add to the declining birth rate was furthered with the introduction of a Maternity Bonus in 1912 (Kingston, 1977), and the establishment of maternal health centres to instruct mothers in nutrition and hygiene (Allen, 1982), which expanded throughout the suburbs in the 1920s (Pascoe, 1998).

The cultural attainment of the good mother syndrome is an ongoing process, whereby prescriptive mainstream texts use the standard of white middle-class

motherhood to reinforce the judgement of mothers (Deacey, 2005; Marotta, 1998). For example, Benjamin Spock's *Baby and Child Care* has sold in excess of 40 million copies (Hays, 1996) and has been translated into 38 languages (Arnup, 1994), suggesting that the consumption of literature championing the dominant model of mothering in the United States is not limited to North America (Marotta, 1998). The advice of professionals was aimed at mothers, which often made mothering more anxiety-inducing (Sanson & Wise, 2001). The model presented by the 'experts' is internalised, and even when it is rejected, mothers feel compelled to justify that rejection (Hays, 1996).

It has been argued that the emergence of the takeover of childrearing by 'experts' occurred around the turn of the twentieth century (Aries, 1962; Donzelot, 1979; Ehrenreich & English, 1989; Marotta, 1998), although women had been 'guided' by the medical experts and inundated with admonishments since at least the early nineteenth century (Deacey, 2005). By the end of the twentieth century, the 'correct' way to mother had undergone several changes, but there was always a right way to do it, and this was promoted by the experts of the day (Marotta, 1998; Marshall, 1991). Straying from the expert view was synonymous to being a 'bad' mother, and even slight digressions from the prescriptive model risked permanent damage to the child (Deacey, 2005). It was believed that if the child failed to achieve, that was directly attributable to the mother (Newell, 1992). Therefore, along with the pressure to have children, there was, and still is, the demand of getting parenting 'right'.

The notion of a good mother has been historically, socially and culturally established and reinforced in Australia from colonisation. Apart from pervasive and

covert pressure to bear children, the experts dictate the correct way to parent a child, and any digression from this assumed path for women (having children and parenting them according to the expert view) results in the woman being viewed as a 'bad mother', or perhaps worse, not a mother. Further, the good mother syndrome is entrenched through societal concepts, fuelled by the cultural norms promoted through television, movies, advertising and magazines.

Playgroups in Context

The definition of a playgroup, according to Playgroup WA (Inc) is "a group of mothers, and the 0 to 5 year old children for which the former are responsible, interacting in creative play activities" (Playgroup WA (Inc), 2003, p. 1). In Australia there are more than 108,000 families attending playgroup each week (Playgroup Australia (Inc), 2007). There are, according to Playgroup WA (Inc) (2007), approximately 530 playgroups in Western Australia, with more than 16,500 families as members (Playgroup WA (Inc), 2008). This membership consists of more than 22,000 children attending one of approximately 1,500 playgroup sessions held in Western Australia every week (Playgroup WA (Inc), 2008). In the context of these figures, it is evident that playgroup is an important social organisation that warrants researching. While there has been recent research on evaluating playgroups (Dadich, 2008; Oke, Stanley, & Theobald, 2007), and research on playgroup in relation to other programs (Greenwald, Siegel, & Greenwald, 2006; Halpern, Lamb-Parker, Acra, & Jaspen, 2006; Lamb-Parker, LeBuffe, Powell, & Halpern, 2008; Timber, Volger-Elias & McGill, 2007), there is, to date, a total lack of Australian research into who uses playgroup and, importantly, why (Dadich, 2008).

Playgroups in Australia are generally based on the New Zealand model. They are a community based program where families with children aged 0 to 6 years (the legal school starting age in New Zealand) attend the same playgroup at the same time each week (for further details, refer to www.ecd.govt.nz/playgroups/faqs.html). Playgroup exists around the world; however, the playgroup model varies. In Britain, for example, each playgroup consists of approximately 40 children, and the children are supervised by a paid employee as well as two or three parents who work voluntarily on a rotational basis (Liebmann, 1996). This model is also adopted in The Netherlands (for further details, see www.parentinginholland.com/peuterspeelzaal.php). Community playgroups in Ireland consist of sessional pre-school services of three and a half hours per day, five days a week, for three- to five-year-olds, whereby children are left by parents in the care of trained professionals (Whyte, Daly, Bujia, & Smyth, nd). In the United States of America, playgroup can be one of several models: it can be based on the British model (Liebmann, 1996); it can be based on the New Zealand model (Zinth, 2000); or, the playgroup is rotational, where all mothers attend the playgroup except one or two, so that approximately every two months each mother has free time while others care for her child or children (Geddes, 2005). It is therefore beyond the scope of this research to compare the Australian playgroup experience with that in other countries. However, the key difference lies in the level of parental participation, which varies from no participation, such as in Britain, to complete participation, such as in Australia.

As mentioned above, playgroup in Australia is based on the New Zealand model. It is not day care; the legal guardians of the child or children attending

playgroup are required to remain in attendance, and, indeed, are expected to actively participate with their child(ren). Each playgroup is run autonomously by a committee that usually consists of parents who are members of the playgroup. Some playgroups have one session, whereas others are multi-sessional (refer to www.playgrouppaustralia.com.au for further details). For example, a playgroup might have sessions that run from 9.30am to 11.30am and 1.30pm to 3.30pm each weekday. Those sessions might include specialist groups, such as a dads' playgroup, a grandparents' playgroup, playgroups for children with additional needs, or playgroups with families who are culturally and linguistically diverse. The number of sessions and the type of sessions run varies between playgroups. These differences are because the existence of the playgroup relies on social capital in the form of volunteerism, and is responsive to the needs of the local community. Most playgroups keep their costs to a minimum, so that as many families in the community as possible are able to attend.

Playgroups also have the opportunity of being members of their state or territory association. Each state or territory association is independent of each other, although they are all represented through Playgroup Australia (Inc). The benefits of state or territory membership vary from state to state, but can include regular newsletters, member discounts at various businesses and access to workshops and seminars. Importantly, membership of a state association includes comprehensive insurance cover that might otherwise be out of reach for small playgroups, but this is mostly reliant on full compliance of membership.

To be a member of Playgroup WA (Inc), for example, each family that is a member of a playgroup must pay membership to Playgroup WA, in order for that

playgroup to be a member association. Not all playgroups are members of the state or territory association. Most of those who choose not to be members are connected to their local church, which has its own insurance. Despite extensive marketing by each state and territory playgroup association to highlight the rewards of membership, most members recognise that the main benefit of being a member is the insurance premiums attached to that membership. Each state and territory association is run by a Board of volunteer members that employ paid staff members as necessary.

Playgroup Australia (Inc) is a federation of the eight state and territory associations, and it consists of delegates from each state and territory association, usually the President (Board member) and the Executive Officer (paid employee). Its aims include the exchange of ideas and resources amongst members, advocacy for playgroups at a national level, and to promote playgroups Australia-wide. Its national office is in Brisbane, and Playgroup Australia also employs staff as necessary.

Australian Government Family Strategies

Generally, Australia's early childhood services compare badly internationally because of relatively poor fiscal investment (Oke, Stanley, & Theobald, 2007). For example, the Organisation for Economic Co-operation and Development (2006) reports that Australia spends 0.1 per cent of gross domestic product on pre-school services compared with the average of 0.5 per cent across all OECD countries. This situation is gradually changing within Australia, notably through the proposed actions culminating from the federal government's recent 2020 Summit (see www.australia2020.gov.au for further details). In addition, each Australian state

and territory government has a strategy for strengthening families and communities. These will now be discussed, briefly, to contextualise playgroups as a community program.

South Australia. The South Australian government has divided prevention programs for child development into three levels; these are universal or primary services, selective or secondary services, and indicated or tertiary services (South Australian Government, nd). Primary services include home visiting, child care services and playgroup, and they aim to improve parenting skills and knowledge by access to relevant services (South Australian Government, nd). Secondary services target individuals or groups considered at-risk, and includes home support to new mothers, Aboriginal child health screenings and domestic violence outreach programs, whereas tertiary services target children and families considered at high risk, and includes victims of crime services, sexual offender treatment, and drug counselling (South Australian Government, nd).

Tasmania. The Tasmanian government's Children and Family Services adopts a program centring on primary prevention and population health (Tasmanian Government, 2005). There are several strategies that the Tasmanian government have identified as priorities. These include home visits to all new parents, telephoning parents at identified key stages (such as 48 hours after discharge from hospital, and when the child reaches the age of three months), and commencement of a vision and hearing screening program for kindergarten children (Tasmanian Government, 2005). The Tasmanian government also offers services to potentially vulnerable families, such as mothers who are isolated,

mothers who have a significant gap between the previous and recent births, and first time mothers (Tasmanian Government, 2005).

Victoria. The Victorian government committed \$163 million over the four years to 2008 to early years support for children and families (Victorian Government, nd). Specifically, the Victorian government developed 57 new hubs, which provide childcare facilities, kindergarten, maternal and child health services and early intervention programs in one building (Victorian Government, nd). Early intervention programs supported by the Victorian government include the accessibility to kindergarten for 2000 children from identified at-risk families, funding for additional playgroups, and the development of home learning programs (Victorian Government, nd).

Australian Capital Territory. The Australian Capital Territory government promotes pre-natal reporting, arguing that concerns are sometimes evident prior to the birth of a new child due to patterns of abuse and neglect (Australian Capital Territory, 2006). In addition, policy revision considers the extension of the family day care program, to allow child care to become more accessible (Australian Capital Territory, 2006).

New South Wales. The New South Wales government has adopted a whole-of-government initiative to support families with children aged up to eight years through home visiting, supported playgroups, and transition to school programs. Known as Families NSW (formerly Families First), the program has been allocated \$12.5 million to expand initiatives, including implementation of the Positive Parenting Program, early screening of pregnant women to detect the possibility of postnatal depression, and parenting information for new parents (see

www.community.nsw.gov.au for further details). Additional services include Aboriginal parenting programs, domestic violence services and drug and alcohol education programs.

Queensland. The Queensland government is increasing its focus on integrating service provision to families, an example of which is the establishment of 24 new hubs that provide child care services, family support services, parent education development, child health services and community activities (Queensland Government, 2006). Additionally, the Queensland government has expressed commitment to both universal services and targeted services (Queensland Government, 2006); universal services are those that are directed at the whole population and include playgroups, child health centres and child care services, while targeted services are directed to individuals or groups considered at-risk, and include services available to children with a disability, young parent programs and parenting services for parents with a learning disability (Queensland Government, 2006).

Northern Territory. The Northern Territory government has identified three key areas to improve child protection and nurturance: children's health; supporting families; and, working together (Northern Territory Government, nd). In addition, it states that it is committed to strengthening families and communities through the provision of early childhood services, including those residing in remote areas (Northern Territory Government, nd). Other strategies include the provision of more funding for family support services, establishment of telephone advisory services for parents, and the introduction of checks for people who work with children (Northern Territory Government, nd).

Western Australia. The Western Australian government has developed the Early Years Strategy, which advocates empowering parents, with the ultimate goal of improving outcomes for children and families through education and prevention programs (Western Australian Government, 2006). The program targets identified at-risk families, such as those who experience domestic violence, mothers with postnatal depression, and young parents. In addition, the program provides services for indigenous families and those that reside in remote areas (Western Australian Government, 2006).

Structure of the Thesis

The next chapter reviews and summarises the existing literature on issues surrounding the good mother syndrome and playgroup and as such embodies current knowledge on the topic. I look firstly at good mothers and defining the good mother syndrome in Australia within a historical context. Secondly, I examine theories of identity and social identity theory. I then discuss how women are placed in the domestic sphere, and, lastly, I examine models of support that mothers receive, including playgroup.

Chapter 3 outlines the research's underlying conceptual framework. Feminist research and social constructionism are discussed and I outline the key values that have guided my research. This chapter introduces the research and I explain the methodology and the two stages of research that I undertook. I also discuss rigour and ethical issues in this chapter, and I summarise the themes that emerged from the data.

The following chapters analyse the data. Chapter 4 examines the good mother syndrome and the role of playgroup, and discusses why the women who

participated in my study attend playgroup. It also examines the factors that contribute to the relationship between the good mother syndrome and playgroup. Chapter 5 investigates issues of identity that emerged from the data, including loss of power issues, postnatal depression and maternal ambivalence. It also examines positive experiences of identity change.

Chapter 6 discusses issues of support, including isolation, familial support and perceived support. Chapter 7 examines expectations of mothering, and how prior expectations compare to the reality of mothering. In addition, it discusses the ideologies surrounding stay-at-home mothers and mothers in paid employment. It then examines both the public and private scrutiny of the good mother. In addition, Chapter 7 investigates the themes of guilt in mothering and unmet needs. Chapter 8 is a summary, and presents the conclusion to the research.

Definitions

Some of the terms used in this research hold different subjective meanings. Therefore, to clarify my meaning, I will define the main concepts that I feel might be unclear.

Family. Ideally, the term 'family' or 'families', in this research, encompasses the myriad of combinations that exists in the community today. This includes, but is not limited to, heterosexual couples with children, same-sex couples with children, single parent families, de facto parents with children, stepfamilies, half-families, blended families and families where no member is a blood relation. However, in reality, this research mostly refers to Anglo-Celtic, middle-class heterosexual coupled families, because these families made up the sample. Also, while Playgroup WA (Inc) recognises and welcomes diversity, the reality is that

playgroup in Australia is, for the most part, attended by Anglo-Celtic, middle-class, heterosexual families. Theoretically, I would like to say that the literature and data in my research includes minority and marginalised families, but I recognise that in most cases it does not. For the purpose of this research, the family includes at least one child who is aged between 0 and 5 years.

'Good mother syndrome'. The good mother syndrome refers to a culturally, historically and socially determined manner in which mothers are expected to act, and what a 'good mother' is supposed to be, defined according to society's ideals. As I discuss in Chapter 8, women often recognise what is a good mother and what is a bad mother, without recognising the ideological concept.

Interviews and focus groups. This research utilised both one-on-one interviews and focus groups for data collection. For purposes of clarity, they are referred to in this thesis as one-on-one interviews and focus groups. When the term 'interviews' is used, without elaboration, it refers to data derived from both one-on-one interviews and focus groups.

Playgroups. Playgroups are attended by children aged 0 to 5 years and their caregiver. Playgroup WA (Inc) acknowledges that while it is mostly mothers that attend playgroup, fathers, grandparents or other legal guardians also attend (Playgroup WA (Inc), 2003). Playgroups in Western Australia are community based programs where the same families attend the same playgroup at the same time each week.

Chapter 2: Literature Review

'Good' Mothers

Motherhood is discussed extensively in the literature, and the literature is replete with ideas of what a 'good' mother should be. A good mother is articulated as a mother who can bond with her child naturally immediately, care for her babies with no help, and obtain fulfilment from the role of selfless carer and nurturer (Choi, Henshaw, Baker, & Tree, 2005; Woollett & Marshall, 2000). The 'good mother syndrome' refers to the socially determined way that mothers are supposed to act, and defines what a 'good' mother is supposed to be, subject to political, cultural and economic influences (Parker West, 2002). While the reality is often very different to the myth, as discussed by Phoenix, Woollett and Lloyd (1991), the ideology remains dominant despite more realistic depictions in popular literature (such as Mauthner, 2002; Schwartz, 1993; Thurer, 1994). Motherhood has been described as both an experience and an institution (Deacey, 2005; McMahon, 1995; Rich, 1986).

Mothers often find that the mothering role carries enormous unanticipated responsibility that can be overwhelming (Barlow & Stewart-Brown, 2001; Bloomfield, et al., 2005; Lopata, 1971; Villani & Ryan, 1997), particularly when mothers have little prior experience of such responsibility (Hohaus, Feeney, & Noller, 1998; Kitzinger, 1978). For example, Bloomfield et al.'s (2001) qualitative study of 70 parents and family support workers found that perception of lack of preparation for motherhood for new parents was a major theme. This is reinforced by the myths, which include the belief that anything less than full-time mothering

will damage children (Cannold, 2005; Hattery, 2001; Newell, 1992; Smythe & Isserlis, 2004), and that a good mother will sacrifice her own life in order to benefit her child (Cannold, 2005; Hattery, 2001; Maher & Saujeres, 2007; Villani & Ryan, 1997), and deny her own needs in order to fulfil the needs of her offspring (Maher & Saujeres, 2007; Marotta, 1998; Raddon, 2002). A good mother nurtures her family and considers care giving to be more fulfilling than paid work (Buzzanell, et al., 2005).

Cannold's (2005) book is the result of a qualitative study with Australian and American women, where she examines circumstantial childlessness. Cannold argues that voluntary childlessness is associated with the good mother syndrome because the unreasonable social expectations that are associated with mothering causes women to balk at becoming mothers; it is another reason, Cannold argues, to delay having children. Cannold's study is a valuable contribution to understanding mothering from the perspective of childless women, however, it is difficult to compare it to other studies, or determine its true value, because Cannold fails to provide the reader with vital information about the participants. Apart from stating that she interviewed both Australian and American women, the reader does not know, for example, how many participants were interviewed, how many were interviewed in each country, or their ages.

Maher and Saujeres (2007) explored the social and cultural construction of motherhood by examining perceptions of mothering of women with children and women without children. Their interviews of 100 Victorian women found that both groups of women (those without children and those with children) responded to popular discourses of femininity, mothering and good mothering, but in diverse

ways. Maher and Saujeres make a compelling argument, demonstrating that women without children rejected the idea that womanhood and motherhood are intertwined, but accepted that good mothering required full time care and attention. Conversely, they found that women with children accepted the notion that maternity was a rite of passage to womanhood, but their view of mothering incorporated an understanding of the importance of achieving their own life goals as well as 'being there' for their children. Overall, Maher and Saujeres found that the ideals of the good mother, such as being a full time stay-at-home mother who lavishes her children with attention and care, persist amongst all women, those that are mothers and those that are not.

Hattery (2001) studied mothers in paid employment to examine how they balance work and family commitments. She obtained quantitative data from a survey of 231 married women with children under two years of age. From this sample, Hattery interviewed 30 women: ten were employed in paid work full time, ten were employed in paid work part time, and the remaining ten were not in the paid workforce. The results of this study found that while factors such as availability of child care and fathers' income and occupation were important variables in shaping the decisions women made about paid employment, the main factor was the type of mothering ideology held. One limitation to the study is the homogeneity of the sample: only one participant was non-white, and no participants were single or from same-sex relationships, a limitation recognised by Hattery. In addition, the questions focussed on motherhood, and the study seems to assume that this is the dominant identity held by the participants, precluding the possibility that, for some

women, the identity may lie within the career chosen, and that motherhood is adapted around paid employment.

Newell (1992) examines the social construction of 'good mothers' (full-time stay-at-home mothers who nurture their child's every need), 'good fathers' (financial breadwinners involved in the physical care of the child, but not household tasks) and 'good workers' (full-time workers with a continuous record of employment), and points out that while the ideology of the good worker is compatible with that of the good father, it is incompatible with the ideology of the good mother. This, Newell argues, means that mothers participating in paid employment cannot be seen as good mothers, because of the conflicting social constructions. Her survey of 66 Birmingham, England, mothers supported her theory that good mothers were viewed as those who stay at home full-time and do the majority of the housework. Women, Newell concludes, will not progress in careers until employers structure positions around family roles, rather than the other way around. However, Newell's argument is based on generalised statements. For example, her assertion that women who are stay-at-home mothers are pressured into returning to work to show 'equality' assumes that stay-at-home mothers feel that pressure and that mothers in the paid workforce want to stay at home.

Raddon (2002) interviewed 'Susan', an academic who was also a mother, to examine discourses that surround 'successful' academics who are also 'good' mothers. The case study, based on a semi-structured interview, reported Susan's feelings of tension between pursuing a career and her mothering role. Raddon argued that career success and mothering are both dominant discourses, but the

social construction of both terms means that they conflict, stating that women cannot comfortably feel successful in both arenas, based on Susan's account. However, Raddon admits that the case study was less like an interview, and more like a discussion, saying that "Susan asked for my opinion on certain issues, which led to an exchange of experiences" (Raddon, 2002, p. 389), which leaves the reader to query how much of Susan's story was the result of leading questions and/or the desire to conform to the interviewer's opinion.

Buzzanell et al. (2005) examined managerial women and how they made sense of work and family choices when returning to paid employment from maternity leave. They conducted interviews with 11 American women, and found that while stay-at-home mothers and mothers in paid employment had common ground (motherhood experiences), those in paid employment focussed on differences, over-emphasising the notion of having the 'best of both worlds'. Buzzanell et al. found that those in paid employment needed to justify their decision to work, for fear of being seen as a 'bad' mother, despite unemployed mothers being uncommon in America.

With the onset of the second wave of feminism in the late twentieth century, women were socially sanctioned, by choice or necessity, to work outside the home. However, society views ambition and motherhood as opposing forces, where professed lack of ambition, and setting aside of personal ambition, is deemed necessary for good mothering (Hattery, 2001; Thurer, 1994). Further, there is a distinction between 'caring for' children and 'caring about' children. The good mother needs to do both. Some mothers may care about their children but it is

caring *for* them (frequently in the home) that makes her a good mother (Stehlik, 1993).

Women are educated about pregnancy and childbirth, but not usually about the process of mothering itself (Bloomfield, et al., 2005; Maushart, 2000). The way women mother is culturally derived (Johnston & Swanston, 2003) and each community has its own beliefs, expectations, norms and rituals that identify a good mother (Thurer, 1994). As such, the idea of motherhood changes not only from society to society, but also through different eras. For example, fifty years ago, mothers were expected to teach their children to abide by the adage that children should be seen but not heard, whereas it is now quite different in Western society. However, it is argued that the current standards for a good mother are now so formidable, elusive, changeable and contradictory that they are unattainable (Bloomfield, et al. 2005; Thurer, 1994).

For example, Bloomfield et al. (2005) conducted focus groups with mothers on a waiting list to participate in parenting programs, as well as program facilitators, interviewing a purposive sample of 70 participants in 12 focus groups. One of the issues raised by the parents in this study was that they were not prepared for motherhood and the responsibilities it brings. Additionally, the family support workers expressed a feeling that motherhood, while viewed as instinctive by society, does not come naturally for some mothers (Bloomfield et al., 2005). While Bloomfield et al.'s study adds understanding to the experiences of mothers, it is important to note that the study was conducted to "identify the major challenges faced by parents of children under the age of 6 years" (p. 47). Further, the sample was drawn from parents waiting to attend a parenting program, implying that

perhaps the mothers that participated in the study had already experienced and identified challenges to their mothering role. These two factors combined indicate that the study by Bloomfield et al. was problem focussed, rather than coming from a strengths perspective.

Mothers have little social, familial or spousal assistance in the parenting role (Kitzinger, 1978; Platts, 1999), although parents are seen as responsible for the physical, social, emotional and cognitive development of their children (Brody, Flor, & Gibson, 1999; Cunningham & Boyle, 2002; Ehrensaft, et al., 2003). A survey conducted by the Australian Childhood Foundation (Tucci, Mitchell, & Goddard, 2005) showed that 70% of parents felt pressure from the community to get parenting right. Further, there is evidence that there is little reassurance that the parenting being done is 'right' or 'normal' (Bloomfield, et al., 2005; Dally, 1982; Lopata, 1971; Tucci, Mitchell, & Goddard, 2005).

A study of 500 Australian parents found that 56% lack confidence about their parenting (Tucci, Mitchell, & Goddard, 2004). In addition, 62% of participants thought that they could be better parents to their children (Tucci, Mitchell, & Goddard, 2004). Tucci, Mitchell and Goddard (2005) found that 24% of the 500 parents surveyed in their Australia-wide study felt that they would be judged negatively if they admitted that they had challenges with parenting. This was supported by the findings of earlier research (de Hoogd, Mitchell, & Tucci, 2003; Tucci, Mitchell, & Goddard, 2004), who found that 36% and 25% of respondents, respectively, felt that they would be judged negatively by others if they admitted that they had issues with parenting. However, these findings need to be accepted

with caution, as details of the studies (such as design of the instrument, questions asked and method of analysis) are not provided.

Parents who perceive their child to have challenging behaviour experience stress, frustration, guilt and depression (Bloomfield et al., 2005; Gross, Conrad, Fogg, & Wothke, 1994; Kwok & Wong, 2000; Long, McCarney, Smyth, Magorrian, & Dillon, 2001). This is exacerbated by the fact that there are an increasing number of children who are labelled as having behavioural problems (Stanley, Richardson, & Prior, 2005). Kwok and Wong (2000) examined stress in relation to parenting in their survey of 526 parents of children aged 2 to 12 years, residing in Hong Kong. This study found that parents experience stress when their children display what they perceive to be challenging behaviour. However, Kwok and Wong proposed several theories regarding this finding, including the possibility that cultural influences affected the outcomes of the study. Specifically, Kwok and Wong suggested that Chinese parents are authoritarian in their parenting practices, so the independence and assertiveness that young children display when commencing school may be misinterpreted by the parents as 'problematic' and requiring more discipline. Kwok and Wong's study makes an important contribution to research in that it examines stress and parenting in a non-Western culture, with findings similar to other studies (Gross, Conrad, Fogg, & Wothke, 1994; Long, McCarney, Smyth, Magorrian, & Dillon, 2001).

Long, McCarney, Smyth, Magorrian, and Dillon (2001) evaluated an intervention program designed to reduce stress, anxiety and depression in parents through the acquisition of skills and knowledge via the program. The 78 participants were measured on two scales (the Hospital Anxiety and Depression

Scale, and a variation of COPE), and found that the coping strategies adopted by parents through participation in the program reduced parental stress. However, Long et al. recognised the two major limitations: that the specific coping strategy that was adopted or that assisted parents was not identified; and, the small sample meant the data was not generalisable.

Individuals who experience a gap between ideal and actual parenting also express lower levels of well-being (Milkie, Bianchi, Mattingly, & Robinson, 2002), and experience stress if they are unable to live up to the expectations of their role (Milkie, et al., 2002). Jack (2000) points to several studies that indicate parents with high stress levels are less effective in their parenting, and suggests that Bronfenbrenner's ecological model promotes support of the individual within the community, and its implementation can reduce overall stress. For instance, Jack (2000) discusses the inter-related effects of poverty, lack of education, unemployment, inadequate housing and poor health on increased stress levels for parents, resulting in negative family functioning, and suggests that social welfare agencies, primary health care teams and schools work together to promote and protect children's welfare.

Milkie, Bianchi, Mattingly, and Robinson (2002) examined the discrepancies between ideal and actual involvement in childrearing for mothers and fathers. They conducted 234 telephone questionnaires in America of married fathers and married mothers, with qualitative questions exploring the ideal division of childrearing and actual division of childrearing. The researchers found that the gap between ideal and actual involvement equated with greater stress for both mothers and fathers. Specifically, perceived over-involvement in traditional stereotypical roles was

interpreted by both mothers and fathers as the mothers doing the bulk of the childrearing, and both thought this was unfair on mothers. Milkie et al. recognised a limitation in the study, that aspects such as emotional support are abstract, subjective and difficult to measure, and responses on such dimensions should be interpreted with this in mind.

Identity

The interaction of expectations set up by the good mother syndrome and reality encompasses a range of complex issues including loss of identity (Belsky, Youngblade, Rovine, & Valling, 1994; Bost, Cox, Burchinal, & Payne, 2002; Cast, 1998), feelings of guilt (Brown, Small, & Lumley, 1994; Deacey, 2005; de Hoogd, Mitchell, & Tucci, 2003), concern around unmet needs (Benin & Keith, 1995; Bloomfield, et al., 2005; Choi, Henshaw, Baker, & Tree, 2005), and perceived lack of support for the parenting role (Banyard & Graham-Bermann, 1993; Baxter, Hewitt, & Western, 2005; Bloomfield, et al., 2005; Ceballo & McLoyd, 2002). The good mother syndrome is inextricably linked to identity – self identity, role identity and social identity – because how the mother perceives herself is entwined with her beliefs of how she is perceived.

Bost, Cox, Burchinal, and Payne (2002) examined support networks for new parents, recruiting 137 North Carolina couples prior to the birth of their first child. Husband and wives, who were interviewed separately, were asked to list people in their social network, rate the time of contact, and the degree of support, using a seven point Likert-based scale. Data gathered by the researchers before the child was born, and when the child was 3, 12 and 24 months of age showed that larger support networks prior to the birth of the first child would more likely indicate the

presence of strong support networks when the child was 24 months. Additionally, Bost et al. attributed strong support networks to decreased challenges to identity.

Choi, Henshaw, Baker, and Tree (2005) studied how women perform femininity in the context of motherhood, which is a socially constructed aspect of femininity. They conducted in-depth one-on-one interviews with 24 Caucasian mothers, and found that the experiences of the mothers postpartum were generally negative. Overall, Choi et al. found that the expectations of the mothers interviewed were not fulfilled, they were unprepared for motherhood, and felt unsupported in their role. The results of this study supported the idea that new mothers face challenges to their self identity, role identity and social identity.

Baxter, Hewitt, and Western (2005) examined the gender division of labour in the domestic sphere. Based on data from the Household, Income and Labour Dynamics in Australia 2000 (HILDA) survey, the researchers analysed data from 5658 men and 6320 women. Their findings showed that while married women in Australia are increasingly part of the paid workforce, changes in the domestic division of labour are much slower to evolve. Baxter et al. argue that the division of domestic labour is slowly changing, in that when women are in paid employment, the variance in gender imbalances in the division of household chores is lessened, but the researchers argue that this is because women do less housework, not because men spend more time doing it. This perceived lack of support compounds any identity issues those mothers might have.

Identity formation is defined as the combination of personal, social and cultural experiences that combine to form an individual's identity (Peterson, 2004). Identity is not static; it is the result of continuous interaction with the environment.

Social constructionists commonly remind us that our identities are not shaped independently of influences, but are a result of our interactions with others (Holstein & Gubrium, 2000). We come to understand ourselves by recognising the view others have of us (Umberson & Terling, 1997). Periods of stability can give way to periods of crisis, depending on the new information absorbed. People seek equilibrium by adapting to new situations using old assumptions. If that cannot be achieved, the inner status quo is challenged, and identity structure begins to alter (De Vaus, 1992).

Given that an individual's identity emerges from social interaction and is continually changing, every individual will have a unique perception of him or herself and of what being a parent involves for him or her (Cast, 1998). In order for these identities to be verified, the parent is motivated to act in a way consistent with those conceptions. Sense of self, or identity, is challenged by the ideals of authority figures in a person's life, the lives of role models and the messages he or she hears and/or the images he or she sees regarding how people exist in the world (Villani & Ryan, 1997). There are links between identity challenges some mothers face and stress (Burke, 1991; Forgatch & DeGarmo, 1997; Lee & Gramotnev, 2007; Simon, 1997; Thoits, 1991), and buffers to stress utilising a variety of strategies therefore assists in identity formation. For example, Forgatch and DeGarmo's (1997) longitudinal study of 138 American mothers found that divorced mothers who effectively engaged resources and problem solving strategies were better able to manage stressful situations and adjusted well to identity change post-divorce. Additionally, a survey of 7619 Australian women aged less than 30 years, conducted by Lee and Gramotnev (2007), found that the

transition to motherhood resulted in self-reported increased levels of stress that may be attributed to identity challenges.

Social identity is the part of self-concept that develops from specific group membership (Tajfel & Turner, 1979; Turner, 1982), as opposed to personal identity, which is the self-concept defined in terms of personal relationships (Hogg & Williams, 2000). Social identity theory is based on the hierarchical structures of different social groups, and those social groups provide members with a social identity (Abrams & Hogg, 1990; Tajfel & Turner, 1979). Social identities not only describe members but also fix suitable behaviours and particular tactics for its members (Abrams & Hogg, 1990), through role identity (Burke, 2004). Being a mother means not only defining and evaluating oneself as a mother but also behaving in ways perceived to be characteristic of being a mother (Cast, 1998). Identities are the internal factor (defined by the individual) and the role is the external factor (defined by social expectations) (Burke & Tully, 1977; Cast, 1998). The mother defines herself depending on how she interprets social expectations around mothering (Cast, 1998).

Within social identity theory, identity refers to the mutualities among people within the group and differences between people that are in different groups (Hitlin, 2003). Social identity is based on group membership that gives self-verification that is shared with other members of the group (Stets & Burke, 1994). As a verified member of a group, through being identified as like the other members, the individual gains recognition, acceptance and approval from other members of the group (Burke, 2004). Hence, while mothers may seek recognition, acceptance, approval and verification within the mothering role through newspapers, magazines

and television (Douglas & Michaels, 2004), they also seek validation and assurance through other group members, who are, in this case, other mothers (Carolan, 2004; Wearing, 1984). For example, Carolan (2004) interviewed 18 Australian women, who reported that their mothers' group provided support and a means of learning through watching the behaviour of other mothers. Carolan's study was with first time mothers over the age of 35 years, and reaffirmed the role of new mothers' groups, particularly for those who might experience difficulty in establishing social networks.

Traditional perspectives view identity as a sequence of fixed cognitive representations predominantly developed through self-reflection (McAdams, 2001). Others suggest that identity is a more compliant concept, greatly influenced by social constructs and situations (Bamberg, 1997; Edley, 2001; Reynolds & Wetherell, 2003), where individuals possess and create a number of different identities in accordance to the relevant social context or situation (Burke, 2004; Reynolds & Wetherell, 2003). The basis of identity theory is the notion that individuals behave in ways consistent with the role they perceive themselves as occupying in order to verify these meanings relevant to themselves (Cast, 1998). A person's social identity has a strong effect on his/her perceptions, emotions and behaviour (Ellemers, Spears, & Doosje, 2002).

Considering the emphasis that is placed on successful motherhood, it is not surprising that being perceived as a good mother is a pivotal identity issue for many women (Collett, 2005). Collett's study examined how women confirm their own identities by their child's appearance, and how their child's appearance was used as a measure of their competence at motherhood. The interviews with 16

mothers showed that a mother's success is measured by her child's achievement. The women in Collett's study said that public self-presentations are important, and the social identity associated with the child was a reflection of whether the woman was a good mother.

Becoming a mother means that a woman's identity shifts and challenges any previous identities held. The actual experience of motherhood can be very different from what the mother expected (Delmore-Ko, Pancer, Hunsberger, & Pratt, 2000). There can be a sudden feeling of isolation that accompanies new motherhood (Carolan, 2004; Cronin, 2003; Dally, 1982; Paris & Dubus, 2005), and often part of the problem lies in the absence of identity support. Frequently, "there is no one to respond to our performance as mothers, no one to approve of us, reward us or provide a comparison for our motherliness, except the child, who takes it all for granted" (De Vaus, 1992, p. 153).

The identity crisis that might occur after becoming a mother can fuel and exacerbate any challenges or concerns as a result of role transition to motherhood (De Vaus, 1992; Friedan, 1963). Indeed, Villani and Ryan (1997, p. 129) say that mothers "who subscribe to the belief that they are solely responsible for their child's outcome set themselves up for a lifetime of conflict and stress". This confrontation with identity in motherhood is important in that the quality of parenting, and by implication, outcomes for children and families are influenced by the way parents resolve this identity challenge (Kim, Sarason, & Sarason, 2006; Lefebvre, et al., 1993; Stone & McKenny, 1998).

Women in the Domestic Sphere

Ideology about motherhood is intertwined with idealised concepts of the family, presuming the image of the idealised white, middle-class heterosexual couple with children enclosed within the family unit (Arendell, 2000). However, the idealised family type – two parents, with the father at work, and the mother at home (de Vaus, 1997; Dingo, 2004; Johnston & Swanson, 2006; Walker, 2003) – is not necessarily the norm in the 21st century (Australian Bureau of Statistics, 2005a; Villani & Ryan, 1997). For example, in 2004, 20.3% of all families were categorised as single mother families, and both parents were employed in 57.3% of all couple families with children less than 15 years (Australian Bureau of Statistics, 2005). Any deviation from the norm can therefore result in identity conflict, as mothers struggle to conform to societal expectations (Arendell, 2000).

Prior to industrialisation, both men and women worked in the home, but with the onset of industrialisation, work shifted from the home to factories, which meant that men were required to leave the home in order to attend work (Watkins, Rueda, & Rodriguez, 1999). This was the beginning of the idea that men were income earners while women stayed home, economically dependent (Watkins, Rueda, & Rodriguez, 1999). The standards of domestic work have increased since the latter part of the twentieth century. Despite more labour saving devices, women spend as much time on housework today as did their grandmothers (Thurer, 1994). However, unlike their grandmothers, women today also work outside the home, with 51.7% of females with children aged 0 to 4 years employed full or part time (Australian Bureau of Statistics, 2005). Arguably, motherhood has changed but mainstream expectations have not (Thurer, 1994).

Further challenges to identity for mothers can be linked to patriarchy and the role of women. Children in most Australian families in the 21st century are born into 'intact families', whereby 69% are born to married couples and a further 18%, approximately, are born to cohabiting couples (De Vaus & Gray, 2003). Despite the apparent stability that these figures indicate, families are becoming smaller and more insular, in that the extended family that was the norm in the 1950s (Villani & Ryan, 1997) is now not so common place (Gilding, 2001; Hugo, 2001; Shonkoff & Phillips, 2000). Regardless of this variation in family make up, and despite the second wave of feminism in the 1970s, women still perform most of the household tasks and child rearing duties (Cunningham & Boyle, 2002; Ehrensaft, et al., 2003; Kroska, 2003; Newell, 1992), even if both mother and father are working in paid employment (Etaugh & Folger, 1998; Kluwer, Heesink, & van de Vliert, 2002; Laflamme, Pomerleau, & Malcuit, 2002; Schussler Fiorenza, 1987). Australian society is such that the responsibility of rearing children, especially young children, falls primarily to the biological mother. Women are seen to have a natural propensity for nurture and care of children and the associated household duties, which therefore makes parenting and domestic labour mainly the domain of females (Kluwer, Heesink, & van de Vliert, 2002; Thurer, 1994; Wearing, 1984).

Laflamme, Pomerleau, and Malcuit (2002) examined parent participation in their interactions with their infants, by collecting data on parental behaviour when children were 9 and 15 months of age. Utilising questionnaires, time-diary reports and observation, Laflamme et al. collected data on 87 families in Montreal. The researchers found that fathers spend less time in interaction with their infants than mothers, even when disparities due to paid employment are considered. The

results are limited, however, by the nature of the observations, which were conducted in a laboratory setting, where the observed interactions were simulated.

Feminist studies indicate that there are obvious disparities for women such as the inequitable distribution of household chores and childrearing (Jackson, 1993; Kroska, 2001; Kroska, 2002; Kroska, 2003; Kroska 2004; Leonard, 2001). Research shows that despite the fact that men are increasingly becoming more involved in domestic duties, including care giving, mothers continue to spend more time with children than do fathers (Baxter, Hewitt, & Haynes, 2008; Baxter, Hewitt, & Western, 2005; Gjerdingen & Chaloner, 1994; Hyuen, Lee, Yoo, & Cho, 2002; Milkie, Bianchi, Mattingly, & Robinson, 2002; Solomon, Acock, & Walker, 2004). For example, Baxter, Hewitt and Haynes' (2008) recent Australian study of 1091 men and women examining the patterns of the burden of housework after the birth of children found that housework increases for women after the birth of each child, but remains consistent for men. The authors of this study found that time spent on housework increased for women after the birth of the first child, but did not change for men. In addition, time spent on housework increased for women with the births of subsequent children, but declined for husbands with higher order births (Baxter, Hewitt, & Haynes, 2008).

In addition, it can be argued that women may, consciously or unconsciously, limit the amount of time that fathers participate in child care activities, as mothers perceive themselves as having expertise in this domain (Coltrane, 1996; De Luccie, 1995; Dienhart & Daly, 1997; Greenstein, 1996; Haas, 1992; Hawkins & Dollahite, 1997; Kazura, 2000; Whiteside, 1998). Further, women increasingly turn to part-time paid work after the birth of their first child, rather than the full-time paid work

patterns their male counterparts continue to follow, in part due to inequalities in earnings between men and women (Baxter, Hewitt, & Western, 2005). It could be argued that women exercise power within the domestic field because they lack power outside the home (Coltrane, 1996; Lamb, Pleck, & Levine, 1987; Maushart, 2000). In addition, while some women complain that men do not help more, women can be satisfied by the thought that domestic work is one area that they do really well, and claim superiority for it (Dienhart & Daly, 1997; Douglas & Michaels, 2004). Women have historically been labelled as the primary care giver (Maushart, 2000; Phares, 1993), even with their entry into the paid work force. Therefore, giving household and care giving responsibility to their partners may create feelings of guilt (Kazura, 2000). In any case, as this is the only real power that women hold (Maushart, 2000), it is unlikely that it would be easily given up. This ideology both assumes and emphasises the traditional gender-based division of labour (Arendell, 2000).

In current mothering mythology, children are seen as perfectible; there are no bad children, only bad parents (Douglas & Michaels, 2004; Thurer, 1994). The nature-nurture debate is now heavily weighted in favour of nurture, which offers endless possibilities for 'transforming' a child, if the mother does the right thing. Genes, class, adversity and biological differences are no longer considered in this time, nor is there any such thing as a 'bad seed'; all children are redeemable because where there is parental will there is a way (Douglas & Michaels, 2004; Thurer, 1994). Despite father involvement, mothers are seen as ultimately responsible for the way their children turn out (Collett, 2005), emphasised by both perceived and real lack of support.

Mothers, generally, receive little support in their mothering role. Despite the fact that men are increasingly becoming more involved in child care, mothers spend more time in the care giving role than do fathers (Baxter, Hewitt, & Haynes, 2008; Baxter, Hewitt & Western, 2005; Gjerdingen & Chaloner, 1994; Hyuen, Lee, Yoo, & Cho, 2002; Milkie, Bianchi, Mattingly, & Robinson, 2002; Solomon, Acock, & Walker, 2004). This is particularly true for divorced and unwed fathers (Arendell, 2000). Other demographics have shown little impact on the amount of parenting assistance a mother receives. For example, mothers from low income groups do not have more help in mothering than wealthy mothers (Arendell, 2000); single mothers do not get more familial support than married mothers (Benin & Keith, 1995); and ethnicity can play a minor role in differences in the support mothers receive (Jayakody, Chatters, & Taylor, 1993).

I recognise that this review concerning women in the domestic sphere does not take into account cultural diversity, nor do I examine family structures beyond the hegemony of heterosexual couples with children. For example, I recognise that in some cultures, especially those that value collectivism, extended families are the norm. I have also not discussed the evolution of women's role in the domestic sphere in relation to single parent families or same-sex parent families. In Chapter 1, I stated that examining the various models of playgroup is beyond the scope of this thesis. Similarly, I would anticipate that examining these groups in relation to the good mother syndrome and playgroup in the depth that they deserve would be beyond the scope of this thesis.

Social Support

Social support is a tool used by new mothers to find their identity and shore it up, and therefore social support is essential in the social identity process (Jack, 2000). Perceived lack of support in the parenting role is a frequent stressor to mothers, especially (but not only) when the child's father is seemingly unsupportive (Heneghan, Mercer, & DeLeone, 2004; Milkie, Bianchi, Mattingly, & Robinson, 2002; Xu & Burleson, 2001). While the support of immediate family, particularly spousal support, is of great importance in maternal adaptation, studies also show that support from individuals outside the familial domain is also of great importance (Bost, Cox, Burchinal, & Payne, 2002; Jack, 2000; Johnston & Swanson, 2004). For example, Bost, Cox, Burchinal and Payne's (2002) study of 137 couples from North Carolina showed that friendships were important sources of support for mothers but not fathers. Additionally, availability of community based support has indicated improved parent-child interactions (Hyun, Lee, Yoo, & Cho, 2002). Mothers seek to normalise their parenting experiences, often through being with other mothers, and to gain the support that they lack from immediate family, for example, when mothers experience social isolation (Calvert, 2000; Jackiewicz, 1998).

Studies have shown that social isolation is one of the key aspects of dissatisfaction with motherhood (Paris & Dubus, 2005; Platts, 1999; Scott, Brady, & Glynn, 2001). For example, Paris and Dubus (2005) interviewed 15 North American women who were participating in a home-visiting intervention. The authors of this study found that the participants felt feelings of isolation due to several reasons, including weather conditions (being winter, it was untenable to

dress an infant and negotiate icy conditions for social contact), geographical isolation, and emotional isolation (for example, friends were too busy to visit, or in paid employment). This feeling of isolation was one of the negative aspects of motherhood (Paris & Dubus, 2005).

The link between social isolation and motherhood dissatisfaction would be particularly so for mothers who have become isolated from their families due to migration (Canavan, Dolan, & Pinkerton, 2000; Haour-Knipe, 2001). If new migrants are not sponsored by family members, it is likely that they will not have a social network to tap into and will find adjusting to the new country difficult (Bottomley, 1975; Oke, Stanley, & Theobald, 2007). Such isolation means that people, especially mothers of young children, seek support from external sources (Jackiewicz, 1998; Sims, 2002), and such support systems can be found at organisations like playgroup. However, Carbone, Fraser, Ramburuth and Nelms (2004) argue that programs that do not embrace cultural and linguistic diversity do little to assist migrant families, as they are seen as too anglicised, clinical, or unwelcoming.

As articulated above, social supports have a direct affect on health and wellbeing, in that it acts as a buffer to stress (Banyard & Graham-Bermann, 1993; Canavan, Dolan, & Pinkerton, 2000; Cohen & Willis, 1985; Dunkel-Schetter, Sagrestano, Feldman, & Killingsworth, 1996; Priel & Besser, 2000; Wijnberg & Weinger, 1998). Socially supportive relationships promote psychological and physical health (Green & Rodgers, 2001; Sarason, Sarason, & Pierce, 1990). Hyun, Lee, Yoo and Cho's (2002) study of 602 mothers indicates that the correlative effects of stress on physical and mental illness is directly related to social ties.

Hence, a greater number of social supports increase the probability of wellbeing (d'Abbs, 1982; Green & Rodgers, 2001) and can be viewed as women's major strategy for coping with stress (Banyard & Graham-Bermann, 1993; Erdwins, Buffardi, Casper, & O'Brien, 2001). Further, studies show that the amount of social support received by mothers is a predictor of the mother's parenting stress (Mulsow, Caldera, Pursley, Reifman, & Huston, 2002) and that increased social support positively correlates to the quality of parenting behaviour (Bost, Cox, Burchinal, & Payne, 2002) and adjustment to motherhood (Hyun, Lee, Yoo, & Cho, 2002), both of which link to improved outcomes for children. Hence, the social support that can be found through organisations such as playgroup can be linked to positive outcomes for children and families. However, it is important to note that many of these studies (such as Bost, et al., 2002; Erdwins, et al., 2001; Green & Rodgers, 2001; Hyun, et al., 2002) are quantitative studies, which are not meaningful when considering mothers' experiences.

Playgroup

The aims of playgroups are articulated as encouraging parents, or regular caregivers, and their children to play and have fun together in a safe and stimulating environment, to promote the importance of parents' awareness of their child's developmental needs, and to assist parents to develop support networks (Playgroup WA (Inc), 2003). Playgroup WA (Inc) encourages individual playgroups in Western Australia to uphold these aims (Playgroup WA (Inc), 2004). Playgroup becomes a validating experience for groups of women whose identity has been challenged, coming together to support each other via a vehicle that encompasses their children. Playgroup is a community of women limited or bounded by internal

and external demands by finding a space to support each other and shore up identity.

There is very little research on the Australian playgroup experience and its role in providing support for mothers and identity issues (Dadich, 2008), but elsewhere it has been shown that emphasis is placed on the importance of co-ordinated and integrated early childhood services (Moore, 2006; Mustard, 2006). For instance, Reynolds, Ou and Topitez (2004) investigated the long term outcomes of educational attainment and delinquency for preschool participants in child parent centres. The Chicago Longitudinal Study examined outcomes for 1539 minority children of low income families growing up in high poverty neighbourhoods. Of those 1539 children, 989 participated in a program that provided educational and family support services to children from three to nine years of age, while 550 children did not participate in the program (Reynolds, et al., 2004). The authors found that participants in the program had significantly higher rates of high school completion, and significantly lower rates of juvenile delinquency.

In another example of the importance of early childhood services, Gomby (2005) examined home visiting programs as a form of early intervention, and found that such programs benefit parents through changes in knowledge, attitudes and behaviour, reduction of stress and depression, and increased support. Children also benefit from home visiting programs through increased health and safety, increased cognitive development, language development and academic achievement, and benefits on social and emotional outcomes (Gomby, 2005). Combinations of home visiting programs with centre based early childhood

education can show long term benefits such as a reduction in crime and juvenile delinquency (Gomby, 2005; Yoshikawa, 1995).

Playgroup can be viewed as an integral part of holistic family services. For example, the services offered to South Australian families through Learning Together Centres include home visits, parent education groups and facilitated playgroups (see <http://www.decs.sa.gov.au/families/pages/familysupport/24513/>). In ACT, child and family centres recognise the importance of child and maternal health (see http://www.cmd.act.gov.au/socialplan/documents/Social_Plan.pdf). Similarly, in Queensland child care and family support hubs emphasise child care, but also promote family support, parent education and child health programs (see <http://www.communities.qld.gov.au/childcare/hub/>). Programs that promote the parent/child relationship are considered as valuable tools in building social capital (McCain, Mustard, & Shanker, 2007).

Research has also shown that programs such as playgroup can assist in socially supporting mothers (Majewski, 1987). For example, Scott, Brady and Glynn (2001) interviewed 243 Australian women to determine the strength of social support that results from new mothers' groups, and found that the majority of new mothers' groups evolve into self-sustaining social support networks that continue 18 months or more after the demise of the formal, structured group meetings. Additionally, Jackson (2006) investigated the experiences of five families from an Australian supported playgroup for refugee families through semi-structured interviews and open-ended questionnaires. One of the major findings of this study was a reduction in social isolation because of friendships developed through the group. The participants of the in depth interviews conducted by Oke, Stanley, and

Theobald (2007) with 14 parents attending playgroup in the Greater Dandenong (Melbourne) area reported that the support mothers received was an important benefit to playgroup. Despite these studies, there is no comprehensive evaluation of playgroups in Australia (Dadich, 2008), nor understanding of its role from a mother's perspective.

In summary, it is generally recognised that early childhood programs play an important role in increasing positive outcomes for children, families and society (Heckman, 2006; McCain & Mustard, 1999; McCain, Mustard, & Shanker, 2007; Mustard, 2006; Shonkoff & Phillips, 2000; Sims, 2002; Tucci, Mitchell, & Goddard, 2005). However, despite playgroup's importance as an early childhood program, there has been very little research to date on who uses playgroup in Australia and why, nor on the playgroup movement itself within an Australian context (Dadich, 2008). While I recognise that there have been several "coffee table" books urging women to overcome what I describe as the good mother syndrome (Douglas & Michaels, 2004; Harris, 1995; Maushart, 2000; Schwartz, 1993; Thurer, 1994), there is a dearth in the literature on how playgroup as a social support organisation relates to the mothering experience, particularly from the view of playgroup members.

Research Questions

The research questions are:

1. What are the salient experiences of mothering in Western Australia in the twenty-first century?
2. Is the challenge to identity more salient with the birth of the first child? How is this phenomenon affected by the birth of subsequent children?

3. Why do mothers in Western Australia attend playgroup? Does playgroup affect the experience of mothering in Western Australia? In what ways does it affect the mothering experience? Does playgroup reinforce or challenge the good mother syndrome?
4. What are the implications for service delivery of playgroups and other parenting programs in Western Australia?

Research Aims

The aim of this research is to explore the lives and experiences of these women, and how they perceive playgroup and mothering, and how they affect each other. A feminist framework is adopted to provide the participants with an opportunity to voice their experiences, thoughts and views on playgroup and mothering.

Chapter 3: Research Approach

This chapter describes the epistemology, theoretical framework, methodology and research method used to investigate mothers' experience of parenting and playgroup.

Researcher Perspective

I am committed to the values of community psychology, particularly empowerment (Hur, 2006; Rappaport, 1984; Watts & Serrano-Garcia, 2003), social justice (Dalton, Elias, & Wandersman, 2001; Prilleltensky, 2001), diversity (Rappaport, 1977; Tricket, 1996), individual wellness (Dalton, et al., 2001), collaboration (Dalton, et al.) and psychological sense of community (Burroughs & Eby, 1998; Chavis & Wandersman, 1990). It was important that my research incorporated and reflected those values as much as possible. My commitment was to allowing the voices of the mothers in my study to be heard without misinterpreting their experiences through my own 'expert' interpretations.

In conceptualising this research, Crotty's (1998) framework is used. His scaffolding includes four elements which inform one another: epistemology, theoretical perspective, methodology and methods. Crotty (1998) suggests that epistemological decisions inform theoretical perspective, which informs the chosen methodology and methods used in research. Epistemology refers to the theory of knowledge embedded in the theoretical perspective and thereby in the methodology. The theoretical framework is the philosophical stance that informs the methodology and therefore provides a context for the research approach. The

methodology is a process or research approach. Research method refers to the techniques or procedures used to gather and analyse data.

Constructionism

In this thesis, the epistemology is constructionist, in that knowledge is considered to be socially contextualised. The notion of a good mother is constructed within our social context, and reflects our social context. Mothers and playgroup members create their own perception of social reality within the context of their social experience.

The origins of social constructionism lie with the work of Karl Mannheim (Crotty, 1998; Hruby, 2001), and were expanded on by Thomas Berger and Peter Luckmann (Allen, 2005; Crotty, 1998; Hruby, 2001) in the 1960s, although evidence of constructionist thought can be found in the writings of Marx (Crotty, 1998; Hruby, 2001), Hegel (Crotty, 1998) and Nietzsche (Hruby, 2001). Social constructionism deals with ambiguity, contradictions and multiple meanings. It is a theoretical framework that is “concerned with explicating the processes by which people come to describe, explain, or otherwise account for the world... in which they live” (Gergen, 1985, p. 266). The way human beings see the world is a social construction (Gergen, 1985; Hoffman, 1990; Patton, 2002), and is viewed as the product of social relationships, practices and discourses (Haslanger, 1995).

In second wave social constructionism (Hruby, 2001), theorists argue that knowledge is contextual, depending on the social, historical and cultural times and settings within which it is created (Gergen, 1985); for social constructionists, meaning arises from social systems and social practices (Allen, 2005) rather than the experiences of individuals within society. A single phenomenon can be

interpreted in a variety of meanings, based on the various constructions of those engaged in the social interaction (Crotty, 1998), and, therefore, there is no one 'objective' truth (Burgess-Limerick & Burgess-Limerick, 1998; Crotty, 1998; Gergen, 1985; Patton, 2002).

The adoption of an epistemological framework of social constructionism enables an understanding of the participants' reality as it is experienced, constructed and interpreted (Sarantakos, 1998). Narrative, dialogue and the diversity of viewpoints are key components in constructing meaning (Gergen, 1999). This approach facilitates the understanding of how a group of Perth women make meaning and sense of the mothering experience, telling a relatively similar story, and supports the feminist concept of 'giving a voice'.

Feminist Theoretical Framework

Guided by a feminist perspective grounded in social constructionism, I conducted in-depth interviews and focus groups to explore how 21 Perth women perceive the mothering experience and playgroup. These guiding frameworks allowed systemic examination of the mothering experience in the participants' time and setting, and, like most feminist research, aims to understand and interpret (Morawski, 2001) the social constructions of the participants.

From the 1960s, feminists have been vocal about reproductive choices such as abortion rights, reproduction technology and women-centred birthing practices (Albury, 1999). From the 1970s, mothering discourse has been challenged by feminist writers (see, for example, Chodorow, 1978, 1989; Dinnerstein, 1977; Firestone, 1970; Kaplan, 1992; LeBlanc, 1999; Maushart, 2000; Mitchell, 1997;

Oakley, 1979, 1986; Rich, 1976; Ruddick, 1980; Summers, 2003; Thurer, 1994; Whelehan, 1995).

In the late 1960s and 1970s, the beginning of the second wave of feminism, feminist researchers (see, for example, Oakley, 1972) reported that the experiences of women were made invisible in traditional research, which was male-dominated and male-controlled (Hercus, 1999). Traditional studies, they argued, viewed research from the point of view of whoever held power, and then represented these gendered and partial truths as universal (Maynard, 1994). While researchers talk about 'feminist methodology', there is debate about what it means to do 'feminist research' (Oakley, 1998; Ramazanoglu, 1992).

To suggest that there is one type of feminist theoretical framework would be a marked oversimplification. Feminism is not a unitary phenomenon and feminist theory is diverse and wide ranging. Feminist research, generally speaking, shares two premises: a belief that women are worthy of study, and an aspiration to improve women's lives through its potential to contribute to social change (DeVault, 1996; Wilkinson, 1997).

Critical Feminist Standpoint Methodology

To understand the particular methodology I have selected, it is necessary to provide an overview of the broad and complex world of feminist methodology. Generally, the feminist theoretical framework draws on various epistemological foundations, which results in a triple typology of feminist empiricism, feminist standpoint theory and feminist postmodernism (Harding, 1987; Stanley & Wise, 1993; Thompson, 1992; Wilkinson, 2001). Presenting a complex theoretical framework in such basic terms suggests that there is heterogeneity between the

three concepts, whereas, in reality, many feminists ascribe to various aspects of each typology (Jagger, 2000; Morawski, 2001; Stanley & Wise, 1993). Despite this concern, discussing the three concepts separately results in a broad outline of feminist research, and gives a background to the approach I have adopted.

Generally, feminist empiricism is any epistemology that combines empirical methodology with feminist perspectives (Campbell, 1994). Feminist empiricists, influenced by second-wave feminist movements, were initially concerned with changing traditional science, which was considered andocentric (Leckenby, 2007). Feminist empiricism can be viewed as the attempt to add women into research (Harding, 1987; Leckenby, 2007), and the inclusion of women and gender in research produces more accurate and less androcentric knowledge (Leckenby, 2007).

While feminist empiricists (such as Eagly, 1995; Halpren, 1994; Hyde, 1994) generally argue that it is both possible and desirable to dispel gender stereotypes, standpoint theorists (for example, Brown & Gilligan, 1992; Gilligan, 1993; Miller & Stiver, 1997) argue that differences should be identified and celebrated. Feminist standpoint research begins with research questions that are part of women's everyday lives (Harding, 1987). It has a specific gender focus and recognises research to be political and change focussed (Kirsch, 1999; Trinder, 2000). Feminist standpoint researchers recognise the importance of giving women voice without reinterpreting or trivialising their experiences (Millen, 1997).

Postmodern feminism arose from discourse analysis and deconstruction, including the French feminist and poststructural writings of Derrida, Cixous, Irigaray and Kristeva (Hruby, 2001; Leavy, 2007; Weeda-Zuidersma, 2007). Postmodern

feminists argue that feminist empiricists and feminist standpoint theorists both revert to the same essentialism that has caused the oppression that feminists tried to do away with (Cosgrove, 2003; Hekman, 1999; Leavy, 2007). While empiricists and standpoint theorists pitch themselves as opposites, postmodernists see them as less polarised because of this commonality of resorting to essentialist logic; empiricists and standpoint theorists are therefore viewed by postmodernists as being at the other end of the feminist epistemological continuum to postmodernism (Leavy, 2007).

When considering alternative theories and feminist frameworks, critical standpoint research (DeVault, 1999; Everitt & Hardiker, 1996; Harding, 1991; Henwood & Pidgeon, 1995; Swigonski, 1993) informed my own work. Feminist standpoint research is concerned with giving women a voice without dismissing, downplaying or reinterpreting their experiences (Millen, 1997). There has been a divergence from feminist standpoint research because of the concerns that it does not consider the diversity of women's experience, for example, that not all women are oppressed. While I recognise that this might be a limitation, I remained committed throughout the study to allowing the voices of mothers to be heard without censure, and with minimal interpretation, while being mindful not to discount diversity.

Research Method

An in-depth descriptive qualitative design was used in this study. The qualitative methodology used allowed me to examine the thoughts, feelings and experiences of the participants, in order to explore the different ways that they experienced parenting and playgroup. Qualitative research allows researchers to

understand the issues for a smaller group of participants in more depth (Patton, 1990), and is intended to explore the experiences of the participants rather than test a specific hypothesis (Bouma, 2000). In order to gain a rich understanding of a person's experience there is a need to utilise an approach that allows participants to share their views, values and their constructed reality.

The next sections of this chapter describe the qualitative studies that were conducted over three years. It outlines one-on-one interviews with 11 playgroup mothers (Stage One) and two focus groups with a total of ten playgroup mothers (Stage Two); one focus group was with first time mothers, and one focus group was with mothers of two or more children. Prior to the interviews I explored the most efficient way to gather the qualitative data needed to investigate the research questions, and, based on the literature (Burgess-Limerick & Burgess-Limerick, 1998; Miles & Huberman, 1994; Patton, 1990; Strauss & Corbin, 1998), I used a semi-structured interview technique. I will now discuss the methods, participants, materials, procedure and data analysis for each stage. I then discuss rigour and ethical issues.

Stage One Methods

The first part of this study utilised in-depth interviews, using a semi-structured interviewing technique, based on the work of Burgess-Limerick and Burgess-Limerick (1998). This approach enabled me to return to each participant a minimum of twice, to clarify themes as they transpired from analysis and also to ask questions relating to issues that emerge from other interviews. A semi-structured interview was used with a list of probes and guiding questions. This enabled an unstilted conversation to develop, whilst still enabling me to remain on

track (Patton, 1990). Semi-structured interviews are useful because they allow the participants to express their views, thoughts and ideas in their own words rather than the researcher's (Reinharz, 1992). The participants' stories were heard, and returning to participants for clarification assisted in further elaboration of issues.

Stage One Participants

The first stage of this research project involved 11 participants from a purposive sample of mothers with at least one child aged between 0 and 5 years. I recruited participants for the study with the assistance of Playgroup WA (Inc). Inclusion criteria included an ability to understand and speak English, and that the participants were mothers of at least one child aged 0 to 5 years. None of the research participants were past or present Board members of Playgroup WA (Inc), nor were they past or present paid employees of Playgroup WA (Inc). As each one-on-one interview was conducted, preliminary analyses were undertaken, as described below, which allowed me to develop issues for further exploration and to decide when no new themes were emerging from the data. At this point it was concluded that saturation was reached (Shah & Corley, 2006; Strauss & Corbin, 1998), and no further participants were recruited. A summary of all participants is contained within Appendix A. The following sections detail demographic information of these 11 participants. All names used are pseudonyms, and details that might identify any participant are not recorded; these ethical considerations are discussed in further detail later in this chapter.

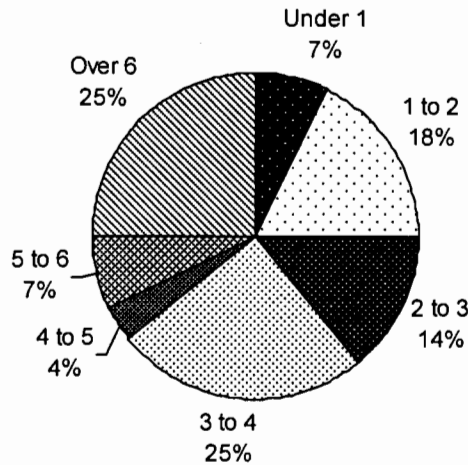
Age. Some participants were reluctant to disclose their age, but all were willing to indicate their age range. Of the 11 participants, one was aged between the

years of 26 and 30, six were aged between 31 and 35 years, three were aged between 36 and 40 years, and one was aged between 41 and 45 years.

Residence. The 11 participants resided in different Perth metropolitan suburbs. These suburbs cannot be identified as doing so might compromise confidentiality. However, when grouping the suburbs in general area, I determined that three participants lived in north eastern suburbs, two lived in inner city suburbs, two lived in suburbs that front the Swan River, and one participant lived in each of the northern, coastal, Hills and inner western suburbs.

Children. Of the 11 participants, one was a mother to one child, five mothers had two children, three mothers had three children and two mothers had four children. This means that, between them, the 11 participants mother 28 children, 17 boys and 11 girls. The children ranged in age: two were under one year old; five were aged between one and two years; four were aged between two and three years; seven were aged between three and four years; one was aged between four and five years; two were aged between five and six years; and, seven were aged over six years. The ages of the children of the participants in one-on-one interviews are depicted in Figure 1, below.

Figure 1: Number of children of participants in one-on-one interviews in each age bracket.



Playgroup. Of the 11 participants in one-on-one interviews, five had attended playgroup for less than two years, three had attended playgroup for two to five years, and three had attended playgroup for more than five years. Their roles at playgroup had varied. Three participants had been members of their playgroup for their entire attendance (that is, they had not been involved at a committee level). The remaining eight participants served on the management committee of their playgroup: one was a management committee member; one had been Honorary Secretary; one had served as Registrar; three had been the Honorary Treasurer; and, two had served as President during their playgroup attendance. Members are voted in to the committee and to positions within the management committee, usually by all members at the Annual General Meeting, depending on the individual playgroup constitution. I did not ask each member how long they had served in these voluntary roles. The participants did not necessarily hold these offices at the

time of the one-on-one interview, but had held the offices at some stage during their playgroup attendance.

The seven playgroups that the participants attended cannot be named because it may breach confidentiality. However, broadly speaking, two playgroups were situated in north eastern Perth suburbs, while the other five playgroups were situated in Hills, western, inner city, Swan River and northern suburbs. Details of the playgroups that participants attended are depicted in Table 1, below, which indicates that some participants in one-on-one interviews attended the same playgroup. Specifically, Renee and Vicky attended the same western suburbs playgroup, Julie and Naomi attended the same inner city playgroup, Leonie and Stephanie attended the same north eastern suburbs playgroup and Kelly and Susan attended the same playgroup, which was situated in a suburb on the Swan River.

Table 1: Playgroups attended by participants.

Area	Playgroup Number						
	1	2	3	4	5	6	7
Hills	Debbie						
Western		Renee Vicky					
Inner city			Julie Naomi				
North eastern				Leonie Stephanie	Mandy		
Swan River						Kelly Susan	
Northern							Meredith

Education. I asked the participants to describe their highest level of education. Of the 11 participants, two had completed Year 10; one had completed Year 12; one attended Business College; two attended TAFE; and, five participants had an undergraduate university degree.

Occupation. The 11 participants reported that, prior to having children, they were employed in different fields. These were, in no particular order: office assistant, nurse, administration officer, lab technician, bookkeeper, computer operator, human resources, swimming teacher, cleaner, nutritionist, and "at DCD". Seven participants said that they were no longer working. Of the other four, one was working full-time, two were employed part-time, and one was employed casually.

Cultural and Structural Homogeneity. As discussed in Chapters 2 and 8, the one-on-one interview participants represented cultural and family structural homogeneity. When I asked participants to describe their cultural identity, they all replied "Australian", except one participant, who elaborated on her answer by adding that, while she considered herself Australian, her family was Italian-Australian.

One participant was living in a de facto arrangement with the biological father of her second child (who was not the biological father of her first child). The ten remaining participants were married to the biological father of their child; those participants with more than one child reported that the children all shared the same biological father. All participants were the biological mother of their child or children.

Stage One Materials

The interview process utilised a thematic framework. The one-on-one interview agenda (see Appendix B) used for this study consisted of a number of open-ended questions, such as 'why do you go to playgroup?' and 'what does playgroup mean to you?', which allowed incorporation of the participant's own terms and concepts into the questions. Similarly, one comment by the participants often led to another question, such as 'you spoke about x, can you tell me more about that?' which allowed continuation based on the participant's response. The wording of questions differed for each participant, depending on the participant's responses. One of the advantages of a semi-structured interview technique is that specific wording is not pre-determined (Merriam, 1998). However, there was some consistency due to having some prepared questions. This approach also built upon participants' own experiences, and engaged participants in conversation, to gain personal micro-narratives (Burgess-Limerick & Burgess-Limerick, 1998). This enabled the interview to evolve (Miles & Huberman, 1994). Each participant was interviewed at least twice, and some participants were telephoned to clarify various discussion points after the emergence of new themes from other participants.

Stage One Procedure

Playgroup WA (Inc) agreed to post a letter written by me to twenty metropolitan playgroups (see Appendix C). The playgroups were selected by a staff member at Playgroup WA (Inc), blind to me. I requested that the letter was sent to playgroups spread throughout the Perth metropolitan area. The playgroups that then contacted me were visited, and people who were in attendance were asked to volunteer to be interviewed.

I firstly ensured that the possible participants met the inclusion criteria for this study, that is, that the participants were current members of a playgroup, and therefore had at least one child aged between 0 and 5 years. I then discussed the study informally with the potential participant, and in particular, the aims and procedure of the interview were discussed. Ethical considerations were also explained, such as confidentiality, opportunities to withdraw from the study, and the removal of all identifying data.

People who were interested in being part of the research were asked to leave their name, telephone number and preferred interview time on a list. I generated one list for each playgroup, to ensure I did not mistakenly recruit all participants from one playgroup. I then chose participants purposively from each list to ask for an interview. The selection of participants was based on compatibility with my own timetable for interviewing availability, and also on who answered the telephone when I rang. In total, seven playgroups responded to my letter, expressing interest in the research. Once one member of each playgroup was interviewed, I then began the selection process again, until interview saturation was reached.

Once the participant agreed to take part in the study, she was invited to choose the place and time for the interview, amenable to her. After an informal review of the aims and procedure of the study, an opportunity to read the information letter (see Appendix D) ask any questions and signed consent (see Appendix E), the interview began. The interview was audio-taped (Rice & Ezzy, 2000; Sim, 1998) with the participant's consent (see Appendix E).

In addition to the tape-recording of the interview, I recorded my thoughts and impressions in my personal journal (discussed below in the sections titled Stage One Analysis and Rigour), which was in view of the participant. The notes made at this time assisted with data collection and analysis (discussed below). It also assisted with keeping the interview on track, as I was able to make notes about salient themes as they emerged (Rice & Ezzy, 2000), and served as a reminder of points raised by the participant that I wanted to discuss further (Patton, 1990). At the end of the interview, the participant was again offered the opportunity to ask any questions. The participants were also informed that they would be able to see a copy of the research report on its completion.

I transcribed the one-on-one interviews as soon as possible after the interview was completed. They were transcribed verbatim, including pauses and laughter. This is an elaborate and time consuming process, but important in qualitative data to ensure the context of the conversation is not lost. Once an interview was transcribed, I read the transcription while the tape played through from the start, to ensure that the record was accurate.

Stage One Analysis

A thematic content analysis was used to explore the data from participants. Although used differently by different researchers, for the purpose of this research narrative analysis refers to standard procedures for coding the data (Denzin & Lincoln, 2003; Green, et al., 2007). I analysed the data through close reading of transcripts, and took each account in context (Denzin & Lincoln, 2003; Strauss & Corbin, 1998). Narrative analysis emphasises building themes inductively from the data, which allows the reader to discern common patterns, beliefs and normative

expectations (Denzin & Lincoln, 2003; Green, et al., 2007; Strauss & Corbin, 1998), while also identifying examples that contradict these commonalities. However, I recognise that feminist research cannot be completely inductive because of the role of prior knowledge (Maynard, 1994).

I examined each transcript individually to see whether any common themes emerged. Coloured highlighters were used to group commonalities together, and notes were recorded in the margins regarding any emerging themes (see Appendix F). Each theme was then examined to see if it linked to another identified theme. These sub-themes were then coded with a letter to identify larger, more encompassing themes. This process continued until it was determined that there were distinct and separate overriding themes that could not be linked any further, except for the fact that they were directly related to the research questions.

Rereading interview transcripts enabled me to become intimately familiar with the data in an effort to identify similarities, differences and patterns, and it allowed me to identify themes in each interview through a process of constant comparison (as discussed in Miles & Huberman, 1994). These themes were then compared across interviews with different participants to ascertain commonalities and differences. Each transcript was analysed on the basis of frequent themes, so that common threads in the stories were teased out (Green, et al., 2007; Smith, 1995a). Cases that did not 'fit' emergent theories were also explored, as these were likely to generate new insights (Patton, 1990; Strauss & Corbin, 1998).

If necessary, participants were approached to clarify a point, to expand on a comment made in the previous interview, or were invited to comment on such insights. This increased the rigour of the research, through cross member checking.

Data interpretations were considered to establish that the themes identified are a true reflection of the data material (Singer, Martin, & Kelner, 1999). The analysis of qualitative research is particularly important when it comes to rigour (which I discuss later in this chapter), while also acknowledging peculiarities and originality in the research process. Each interview was analysed as soon as possible using thematic identification, which is a process where each interview is independently checked for emergent themes (Crotty, 1998).

A first analysis of sub-themes was performed prior to carrying out the next interview (Miles & Huberman, 1994). Data was analysed using an interpretive framework using Miles and Huberman's (1994) thematic content analysis technique. Green, et al. (2007) identify the four steps of thematic analysis as data immersion (reading transcripts to get a sense of the information), coding (identifying patterns, and possibly re-reading transcripts as new patterns emerge), categorising (linking or grouping the coded data) and theming (an interpretive stage that results in theory based conclusions). This method was selected as it focuses on retaining the essence of the participants' experience without excessive direction by the researcher analysing the material. Sub-themes and themes were given to some participants to verify the truth-value of my interpretation of the text (Berg, 2000). The process of data analysis for the one-on-one interviews in relation to the focus groups and collection of secondary data is represented in Figure 2.

During the initial reading, I noted my reflections and reactions to the material. This provided a clear audit trail. Throughout the collection of data, I kept a journal, recording details of the collection and analysis of data (discussed below, in

the section titled Rigour). Reflections also allowed me to keep an audit trail of the data analysis process and helped to ensure rigour (Lincoln & Guba, 1985).

Stage Two Methods

The data collected through the one-on-one interviews were supplemented by focus groups consisting of playgroup members who were first time mothers of children aged less than two years, and playgroup members who had more than one child. Focus groups were used after the one-on-one interviews were conducted and analysed to explore emergent issues of expectations, identity and support. Additionally, the focus groups explored the role of playgroup in supporting or challenging expectations of motherhood.

Focus groups allow collective discussion on a specific phenomenon, which then provides a deeper shared understanding of the topic (Willgerodt, 2003). They encourage self-disclosure among people who have a common characteristic (Kruegar & Casey, 2000). They are an effective way to obtain a rich understanding of what people think, feel and have experienced (Morgan, 1998). A focus group is particularly useful for triangulation of findings obtained from other research methods (Krueger & Casey, 2000). Triangulation relates to the use of different methods of data collection within a single study to confirm the focus of the research (Lincoln & Guba, 1985), and to enhance rigour (Mays & Pope, 1995). As focus group facilitator, I adopted a low-directive but highly-interactive style, as discussed by Stewart and Shamdasani (1990). This allowed the group's views to emerge, yet also ensured my topics of study were discussed by the group, without accessing specific data through question design.

Stage Two Participants

The first focus group consisted of five mothers who were current playgroup members, who had more than one child from separate births (hereafter referred to as focus group one). These mothers all attended the same playgroup. The second focus group consisted of five mothers who were current playgroup members, who were first time mothers of children aged between two and three years (hereafter referred to as focus group two). These mothers also attended the same playgroup, but not the same playgroup as the first focus group participants. The participants were recruited again with the assistance of Playgroup WA (Inc). A summary of all participants is contained within Appendix A. Inclusion criteria included an ability to understand and speak English, and that the participants were mothers of children aged 0 to 5 years. Participants were not past or present Board members of Playgroup WA (Inc), nor were they past or present paid employees of Playgroup WA (Inc). The following sections detail the demographic information of these ten participants.

Age. Ages of focus group participants were recorded as age ranges, to allow comparison with one-on-one interview participants. In focus group one, one participant was aged between 26 and 30 years, two were aged between 31 and 35 years, and two participants were aged between 36 and 40 years. In focus group two, one participant was aged between 26 and 30 years, two were aged between 31 and 35 years, and two participants were aged between 36 and 40 years. In total, two focus group participants were aged between 26 and 30 years, four were aged between 31 and 35 years, and four participants were aged between 36 and

40 years. The comparison of age ranges between one-on-one interview participants and focus group participants is demonstrated in Table 2.

Table 2: Age Range of All Participants (in Years)

	26 to 30	31 to 35	36 to 40	41 to 45
One-on-one	1	6	3	1
Focus Group 1	1	2	2	
Focus Group 2	1	2	2	
TOTAL	3	10	7	1

Residence. All participants resided in or near the suburb their playgroup was situated in, which is described below. The five participants of focus group one resided in five different Perth metropolitan suburbs. The participants of focus group two resided in three different Perth metropolitan suburbs. In total, the focus group participants resided in seven different Perth metropolitan suburbs, because one participant from focus group one and one participant from focus group two resided in the same suburb.

Children. Of the five participants in focus group one, four had two children, and one had three children. All five participants in focus group two had one child each (though one was expecting another child approximately two months later). In total, the focus group participants had 16 children between them.

The children ranged in age. Of the 11 children (six boys and five girls) of the five focus group one participants, one was aged under one year; one was aged between two and three years; three were aged between three and four years; two were aged between four and five years; and, four were aged over six years. The

five children (three boys and two girls) of the five focus group two participants were all aged between two and three years.

Playgroup. Of the five participants of focus group one, one had attended playgroup for less than two years, two had attended for two to five years, and two had attended for more than five years. Of the five participants of focus group two, one had attended for less than two years, and the remaining four attended playgroup between two and five years. The comparison of age ranges between one-on-one interview participants and focus group participants is demonstrated in Table 3.

Table 3: Playgroup Attendance of All Participants (in Years)

	Less than 2	2 to 5	More than 5
One-on-one	5	3	3
Focus Group 1	1	2	2
Focus Group 2	1	4	
TOTAL	7	9	5

One of the participants of focus group one had been a committee member, and one of the participants of focus group two had been session leader. All other focus group members had been members of their playgroup. I did not ask each member how long they had served in these voluntary roles. The participants did not necessarily hold these offices at the time of the focus group interview, but had held the offices at some stage during their playgroup attendance.

One playgroup (that focus group one participants were drawn from) was situated in a north eastern Perth suburb, and the participants of focus group two attended a playgroup in a northern Perth suburb.

Education. I asked the participants to describe their highest level of education. In focus group one, two participants completed Year 12, two had attended TAFE, and one had completed an undergraduate degree. In focus group two, one participant had completed Year 10, two had completed Year 12, and two participants had completed an undergraduate degree. The comparison of level of education between one-on-one interview participants and focus group participants is demonstrated in Table 4.

Table 4: Level of Education of All Participants

	Year 10	Year 12	Business College	TAFE	University Degree
One-on-one	2	1	1	2	5
Focus Group 1		2		2	1
Focus Group 2	1	2			2
TOTAL	3	5	1	4	8

Occupation. The ten focus group participants reported that, prior to having children, they were employed in nine different fields. Focus group one participants had been employed as a hairdresser, function co-ordinator, deli assistant, business owner and administrator. Focus group two participants had been employed as a hairdresser, child carer, lawyer, secretary, and "in accounts". In each focus group, two participants said that they were in paid employment, and three said that they did not work outside the home. In focus group one, one participant was employed

full-time and one part-time. In focus group two, both participants that were in the paid workforce were employed part-time.

Cultural and Structural Homogeneity. As discussed in Chapters 2 and 8, the focus group interview participants represented cultural and family structural homogeneity. When I asked them to describe their cultural identity, they all replied “Australian”, except one participant (focus group one), who described herself as Asian-Australian. In focus group one, two participants were married, and three were in de facto relationships (although one participant married her partner shortly after the focus group was held). The five participants of focus group two were all married. All participants were in relationships with the biological father of their child or children. The focus group one participants, who had more than one child each, reported that their partner was the biological father of all their children. All participants reported that they were the biological mother of all children.

Stage Two Materials

The focus group interview agenda (see Appendix G) consisted of several open-ended questions, such as ‘how do you feel about support as a parent?’, ‘how would you describe yourself prior to becoming a parent?’ and ‘please tell me about some of the expectations placed on you as a parent’. It was anticipated that such open-ended questions would lead to discussion amongst the group members, leading to the synergistic effects of interaction in augmenting discussion of the topic, as described by Sim (1998) and a shared understanding of issues around expectations of motherhood, identity and support.

Stage Two Procedure

Playgroup WA (Inc) assisted in recruiting focus group participants. A letter was sent to ten purposively selected metropolitan playgroups, selected by a Playgroup WA (Inc) staff member, blind to me, inviting its members to participate in the focus group (see Appendix H). As Playgroup WA (Inc) has some basic demographic data of the composition of some playgroup sessions, the letter was aimed at playgroups that hold at least one session for new first-time mothers. Two playgroups volunteered to conduct focus groups, and the two groups (first time mothers and 'experienced' mothers) were derived from those two playgroups.

I ensured that focus group participants met the inclusion criterion for this study, that is, that they are first-time mothers who currently attend playgroup, with children aged between two and three years, or that they are mothers who currently attend playgroup with at least two children (from separate births), one of whom must be aged under five years. Each focus group was derived from an existing playgroup session, and I was asked (by the person who contacted me in response to my letter) to attend a playgroup session to conduct the focus group in an informal manner, as being in a familiar place made the participants more at ease.

After an informal review of the aims and procedure of the study, an opportunity to read the information letter outlining the study (see Appendix I) and ask any questions and informed signed consent (see Appendix J), the focus group began. The focus group discussion was audio-taped (Rice & Ezzy, 2000; Sim, 1998) with the participants' consent (see Appendix J). At the end of the focus group, the participants were offered the opportunity to ask any questions, and also to see a copy of the research report on its completion.

In addition to the tape-recording of the interview, I recorded my thoughts and impressions that arose during and after the focus group in my personal journal (discussed below in the sections titled Stage Two Analysis and Rigour), which was openly on display to the participants. I also used the personal journal to record comments made by the participants after the tape-recorder was switched off (Grbich, 1999). The notes made at this time assisted with data collection and analysis (discussed below). It also assisted with keeping the interview on track, as I was able to make notes about significant themes as they emerged (Rice & Ezzy, 2000), and served as a reminder of points raised by the participants that I wanted to discuss further (Patton, 1990).

As with the individual interviews, the participants in the focus groups received a copy of the transcript of the focus group discussion, as well as a summary of the preliminary analysis. The participants were invited to provide feedback on these documents (see Appendix K), but none chose to do so. Such member checking procedures adds to strengthened rigour of analysis through increased transparency (Whitley & Crawford, 2005). Additionally, this collaborative approach to analysing the research is reflective of feminist research (Billson, 1991). As the themes emerged from the data, some members of the focus group one (conducted with mothers of more than one child) were contacted for clarification of issues.

The focus group interviews were transcribed by me immediately after the interview was completed. They were transcribed verbatim, including pauses and laughter. This is a particularly elaborate and time consuming process, because of the need to distinguish one unfamiliar voice from another. Once a focus group was

transcribed, I read the transcription while the tape played through from the start, to ensure that the resultant document was accurate.

Stage Two Analysis

Rereading focus group transcripts enabled me to become intimately familiar with the data and to identify similarities, differences and patterns in relation to the previously collected data. Further, it allowed me to identify themes from the focus groups through a process of constant comparison (as discussed in Green, et al., 2007). These themes were then compared to the themes that emerged from the one-on-one interviews to determine commonalities and differences through axial coding, which seeks to identify causal relationships between themes (Strauss & Corbin, 1998). Comments from the focus groups that did not 'fit' emergent theories from the interviews were also explored, as these generated new insights (Patton, 1990).

Data were again analysed using an interpretive framework using Miles and Huberman's (1994) thematic content analysis technique. This method continued to be used as it focuses on retaining the essence of the participants' experience without excessive direction by me. In addition, it was important that I used the same process of data analysis for the focus groups that I used to analyse the data from one-on-one interviews.

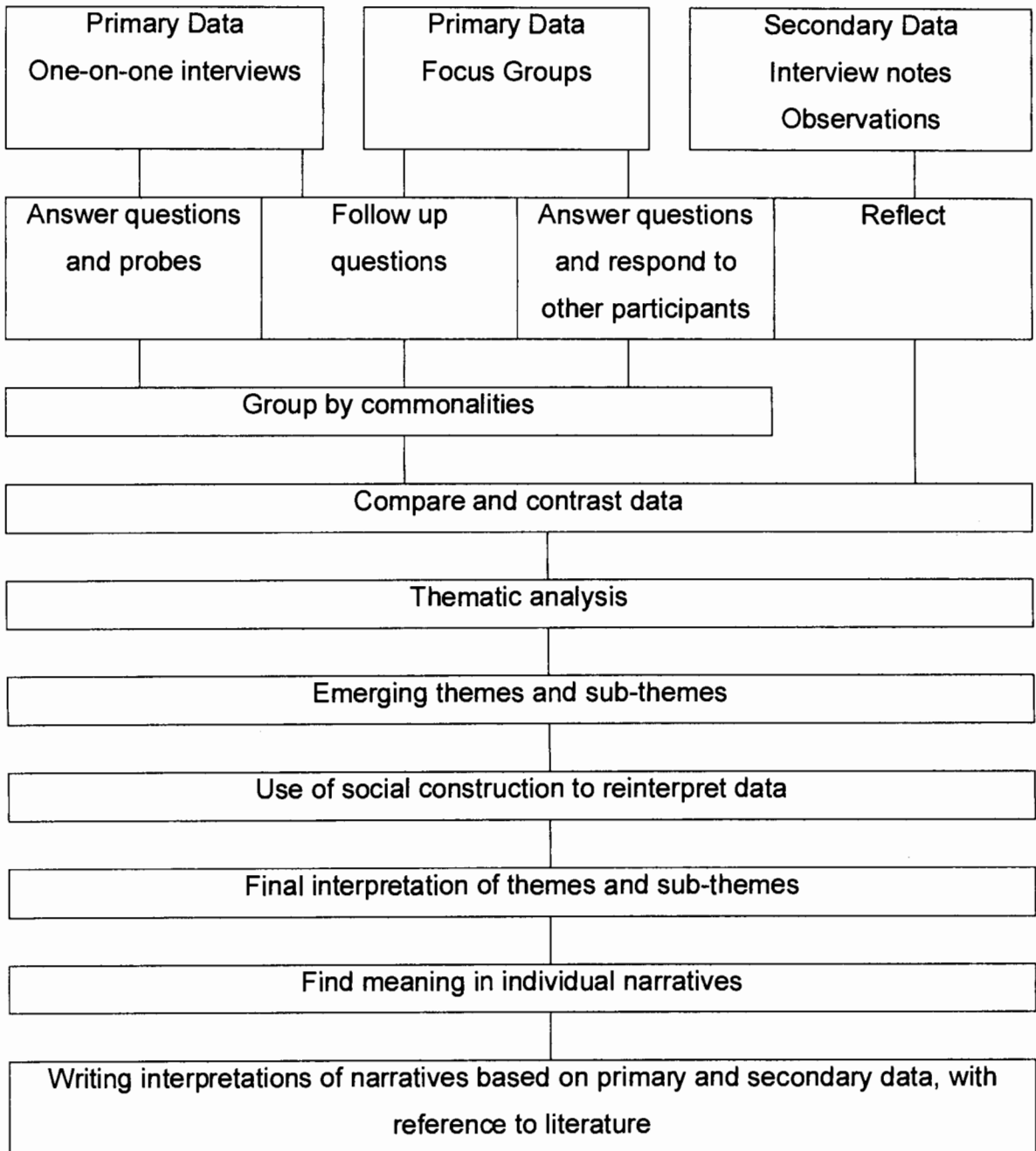
I examined each focus group transcript individually to determine whether any common themes emerged. Notes were recorded in the margins regarding any emerging themes. Each theme was then examined to see if it linked to another identified theme within the same focus group. These sub-themes were then coded with a letter to identify larger, more encompassing themes. This process continued

until it was decided that there were distinct and separate overriding themes that could not be linked any further, except for the fact that they were directly related to the research questions. Each focus group transcript was analysed independently of the other, and independently of the one-on-one interview transcripts, but if I recognised a connection between data, it was recorded in the margin.

Several focus group participants were approached to clarify a point, to expand on a comment made in the previous interview, or invited to comment on such insights. This increased the rigour of the analysis. Data interpretations were considered to establish that the themes identified are a true reflection of the data material (Singer, Martin, & Kelner, 1999). Sub-themes and themes were submitted to some participants to verify the truth-value of my interpretation of the text (Berg, 2000).

When the final themes were documented, I compared them with existing literature, to determine the extent of the substantive nature of the findings (Crotty, 1998; Green, et al., 2007; Miles & Huberman, 1994). The process of data analysis for the focus groups in relation to the one-on-one interviews and collection of secondary data is represented in Figure 2.

Figure 2: Process of data analysis



Rigour

A main goal that qualitative research should seek to achieve in order to maintain rigour is for the data to be collected and analysed in such a way that

another researcher would analyse the data in the same way with essentially similar themes emerging (Mays & Pope, 1995). In qualitative research, we use speak of credibility, dependability, confirmability and transferability (Lincoln & Guba, 1985). I used the following techniques to enhance rigour in the research.

Multiple sources of data collection enhance rigour in qualitative research (Berg, 2000; Patton, 2002). In my research, I utilised both primary and secondary data collections: the primary sources of data were one-on-one interviews with 11 women, and two focus groups with a total of ten women. My secondary sources of data were field notes and observations during the interviews, which I have discussed above.

Rigour can be aided with the maintenance of detailed records of interviews and observations, as well as careful documentation of the process of analysis (Mays & Pope, 1995). The audit trail in my research was primarily a reflective journal that consisted of summaries of discussions with others about my research, notes to me regarding the research and its progress, and other memos. I also used a personal journal in which I took extensive notes during and after the interviews (for an example, see Appendix L). For example, after the interviews I noted my thoughts on the setting, atmosphere and participant reactions, which can add depth to the transcribed interviews (Lincoln & Guba, 1985; Strauss & Corbin, 1998) and add to the credibility and dependability of the research (Rice & Ezzy, 2000).

The transcripts and analyses underwent a careful process of member checking; both the transcripts and the thematic analysis was forwarded to the interviewee, who was then able to clarify a point, withdraw an opinion, or to confirm that the analysis was a true and accurate account of the story that they had to tell

(Appendix K). None of the participants chose to change the documents they were forwarded, but allowed the material to remain the property of the interviewees, which is consistent with feminist critical standpoint methodology. This collaborative approach to analysing the research is reflective of feminist research (Billson, 1991).

Ethical Issues

On embarking on this thesis, approval was sought from the Board of Ethics in accordance with Edith Cowan University's policies. This research has been conducted within the guidelines stipulated by the Board of Ethics, and interviews and focus groups were not conducted until such approval was gained.

This thesis was written after confidential interviews and focus groups were conducted. It was imperative, for ethical reasons and in keeping with feminist ideals, that the participants signed an informed consent form prior to the interview or focus group commencing (see Appendices E and J). All participants were made aware that they could withdraw from the study at any time, even once the interview or focus group was completed, though none chose to do so. In addition, the women were made aware that if any participant made a statement within the interviews that they later regretted, then it would be eliminated from the transcript; no participant advised that they requested such retraction. One of the conditions of these interviews and focus groups was that the tape recordings and the transcripts would not be viewed by any party apart from me and the research supervisors (a copy of the information sheet given to participants is contained in Appendices D and I). In accordance with ethical requirements, the tape recordings were destroyed once they were transcribed.

From a feminist perspective, I was consistently aware of the unequal power differential that can exist between the researcher and participants (Manias & Street, 2001; McRobbie, 1991). This may have been exacerbated by participants' knowledge of my own executive position within the playgroup organisation. It cannot be assumed that research conducted by women and with women is without such power differentials (Ramazanoglu & Holland, 2002), especially in an interview situation. By adopting a semi-structured interview technique, as described above, I tried to make the interviews more conversational than confessional, and, at times, used self-disclosure to reduce any perception of unequal power.

In addition, I remained vigilant of verbal and non-verbal responses to my questions throughout the interview process. In particular, I was looking for signs of distress from participants, as the topic being discussed was potentially a stressful one. For example, participants could question their own parenting techniques and their 'adequacy' as a mother during or after my interviews. I saw no such signs of unease amongst my participants, but had I witnessed distress, there were a variety of options open to the participant, such as taking a break from the interview, terminating the interview, or requesting referral to counselling services.

It is important for participants in research to be able to reveal their details without being identified in any way. As excerpts from the transcripts are used in this data, true confidentiality cannot be ensured, however, I was able to take steps to ensure anonymity of the participants. Therefore, all data used for this thesis is non-identifying, in order to ensure anonymity is maintained. The names used are pseudonyms, and none of the pseudonyms are the true names of any participant. All identifiers within the transcripts, such as children's names, spouse's names and

suburbs, were removed from the transcripts, and none of these appear within this research. When checking the transcripts, participants were asked to ensure that the information contained within maintained their anonymity.

The transcriptions have been copied to a disc, and this is the only copy that now remains. The disc is in the custody of the School of Psychology and Social Science Postgraduate Co-ordinator, and will remain so for the required preservation period of five years.

Methodological Limitations

As with most research, my study had several methodological limitations. Limitations are discussed in more depth in Chapter 8, but it is important to acknowledge these limitations before presenting data findings, so that any interpretations can be read in context. I discuss the methodological limitations below.

While focus groups can be useful for extracting rich qualitative data (Kruegar & Casey, 2000; Morgan, 1998; Willgerodt, 2003), one of the issues in practice is that not all participants will talk in equal amounts. In any case, it is unlikely that focus group participants will speak as much as one-on-one interview participants by the fact that they have to 'share the stage' with several others. One of the methodological limitations of this research, as a result, is that some participants are quoted more frequently than others. This is not because their views were more valid or quotable, but is merely a result of these participants being more vocal.

Further, it is possible that focus group participants in particular answered questions and added comments that enhanced desirability (Jovchelovitch & Bauer,

2000). Indeed, one of the drawbacks to in-depth interviews lies in what Gomm (2004) refers to as the 'Hawthorne effect', whereby participants respond in a way they may not normally do because they know they are being researched. I tried to minimise this possibility by making the interviews more conversational than interrogative, by utilising self-disclosure where appropriate, and by framing my questions carefully so that they did not appear judgemental.

An additional limitation with the focus group interviews is that they were held during the playgroup time. I held the focus groups during the normal playgroup sessions for two reasons. Firstly, the person who contacted me in response to my letter requesting participants, in both instances, specifically asked me to hold the focus group interview during their normal playgroup session time. Secondly, it was important that the participants were interviewed in a place that made them comfortable. However, one limitation to this process that I did not consider was that the mothers were not always concentrating on the focus group discussion, as they were still responsible for the care of their children. For example, one participant spent little time in the focus group discussion as she attended to her daughter. Future research (which I discuss in Chapter 8) might consider holding the focus group at a time when others could provide childcare, so that the participants were less distracted.

Overview of the Emergent Themes from the Data

The first stage of this research was data driven, whereby understanding develops from the data collected (Braun & Clarke, 2006), and while I thought that the issues surrounding loss of identity might emerge, it was impossible to predict what the participants would reveal as salient issues. During the interviews, the

participants revealed a number of common themes. In particular, they discussed an overall, encompassing theme of the good mother syndrome, underlined by feelings of guilt in the mothering role, and unmet needs. Additionally, the participants reported themes of the importance of support in the parenting role, and how that support is gained and utilised. Specifically, the participants did express a feeling of loss of identity when becoming a mother, and recognised the importance of social support in forging a new identity. The women interviewed who had more than one child (from separate births) recognised that these issues were more salient after the birth of their first child, and less pronounced with subsequent births. They also mostly recognised the importance of playgroup as a vehicle in forging this new identity and shoring it up using the social support offered by playgroup as a means to this end. Most of the participants recognised the benefits of playgroup in addressing these linked issues.

The second stage of this research was theory driven, as the data was approached with specific questions in mind that surfaced from the interviews that were then coded around (Braun & Clarke, 2006). The themes that emerged from the interviews were explored through analysis of the focus group interviews. It was interesting to explore the idea that identity issues are especially important to first time mothers, and relate to parenting at a particular stage. That is, it was both interesting and important to explore whether the identity problems as expressed initially in the interviews are isolated with becoming a mother the first time, or whether the identity issues remain consistent with second and subsequent children. Further, the literature mostly supports the issues raised by the participants in the

study. The themes I identified from the interviews of all women will now be discussed in depth, with references to findings in the literature.

Chapter 4: The Good Mother and the Role of Playgroup

A primary theme that emerged from the interviews was the concept of the good mother syndrome. The women who were interviewed in this study contemplated their images of good motherhood. The following statements were made by focus group participants (with the exception of Leonie and Stephanie, who offered the information as part of their one-on-one interviews) after I asked the question “what is a good mother?” during the focus groups. I asked this question because the issue of being a good mother emerged from the one-on-one interviews.

A good mother is one who puts the needs of her children first (Leonie, one-on-one interview).

I think a good mother is someone who loves their children unconditionally, provides for them, listens and understands them and helps them with anything and everything in life (Melanie, focus group one).

A good mother is a person who is ready to give up her time to join the children with the activities that mean a lot to them. To put aside what needs she has and experience life with them (Stephanie, one-on-one interview).

A good mother, in one way, would be a mother that fulfils her child/children's everyday needs such as feeds them, washes them, provides clothes, access to education and so on. And then there is being there for them emotionally and mentally and playing an active role in their development of the concepts of life as we know it (Ella, focus group one).

A good mother is someone who takes time with the kids, and loves and nurtures them.... Everyone is a good mother in a different way (Peyton, focus group two).

A good mother, a good mother sacrifices any needs she has for the sake of her children (Kendra, focus group two).

This supports the idea of good mother syndrome through expression of the notion of self sacrifice; the idea of putting aside personal needs is a theme that will be explored in depth throughout this research. The good mother syndrome is an overarching theme that this present research finds encompasses the themes of loss of identity, lack of support, expectations of mothering and sense of failure, guilt and unmet needs. These concepts make up the ideology of the good mother syndrome, and were discussed by the participants in relation to playgroup. However, while there is evidence that the mothers recognise the concept of good mothers and bad mothers, they do not necessarily recognise the good mother syndrome as an ideology. This is a concept that I discuss further in Chapter 8.

It is argued in this thesis that playgroup, for the mothers I interviewed, serves one of three purposes: to develop a sense of belonging; to seek validation as a mother; and, to claim and exercise expertise. In addition, this research argues that the participants of this study noted that whether the good mother syndrome is reinforced or challenged by playgroup also depends on three factors: group dynamics within the playgroup session; stage of parenting; and, geographical factors. I shall further explore the data to provide support for these claims.

Sense of Belonging

Going through similar experiences bonds mothers through their experiences (Woollett, 1991). In accordance with Heneghan, Mercer and DeLeone (2004), who found that mothers gain strength from other mothers, and feel less isolated by attending support groups, my study found that playgroup was sometimes viewed as beneficial for socialisation of both mother and child.

Sometimes when my husband was home from work, I would come to playgroup without the kids. Friday is my playgroup day, it's my time. My boss wanted to change my day off to Monday, and I said no way, Friday is my playgroup day, I'm not changing playgroup. I'd rather quit my job than miss out on playgroup (Leonie, one-on-one interview).

I needed the socialisation and so did the boys. I'm the mother of twins, so I understood very early on that I was going to need some sort of support, so it was good for me, but also, I didn't want the

boys to get used to being just by themselves and having just each other to play with, though that would be very easy to do (Julie, one-on-one interview).

As she was an only child, she needed someone to play with, and, honestly, so did I! (Kendra, focus group two).

Friendship from other new mothers can lessen a sense of aloneness and provide support (O'Donnell, 1983). A perceived lack of support amongst new mothers can be a stressor, and the ability to share mothering experiences and the stresses of parenting is deemed helpful in reducing the negative effects of such stressors (Heneghan, Mercer, & DeLeone, 2004). Playgroup was viewed by mothers in my study as reassuring them and supporting them in their parenting role, and in providing emotional support that might otherwise be lacking.

Right from the start I realised I was going to need more emotional support than I had. My mother came over for the birth, and the in-laws came over, but it's not the same as having people here all the time, and when you've had a bad night's sleep, being able to call on gran and say hey, you know, so playgroup has been important for me, very, very important for me, and I know there are other people at our playgroup who have a very similar story (Naomi, one-on-one interview).

[I joined playgroup because] I wanted [my son] to have interaction with other small children, which we didn't have, and also for me, although we have lived in the same area for a long time, because I've worked, I hadn't met people in the same situation. Most of our friends were older, and grandparents (Kelly, one-on-one interview).

I find a lot of the parents are much the same as me down there [at playgroup]... because they're a responsible parent trying to do the best thing for their children (Meredith, one-on-one interview).

I have a lot of respect for the other mums that I go to playgroup with and how they parent, and so in some ways, they act as a guide, they make me feel as though what I do as a parent is valid. And I really think that when you are with other people for a while like that they have to influence you to some respect, even if it is only seeing something you don't like and don't want to do with your children (Julie, one-on-one interview).

Validation as a Mother

The availability of community based support has been associated with an improvement in the nature of parent-child interactions (Atkins, 1986; Hyun, Lee, Yoo, & Cho, 2002), and helps to establish parenting methods for new mothers (Bornstein & Lamb, 1992). Further, reported benefits from informal social support

include feelings of community, companionship, normality, mastery and control, and access to emotional and informational assistance (Levine, 1988; Solomon, Pinstrang, & Barker, 2001). Some mothers in my study viewed playgroup as a valuable tool for getting appropriate advice on parenting issues, as it is sometimes the case that parents will not ask 'experts' for advice, especially if the issue seems trivial (Henderson & Lucas, 1981). Informational support from family members, especially the maternal mother, has been found to be crucial to new mothers (Cronin, 2003), a finding supported by other studies (Bailey & Pain, 2001; Conway, 1999; Folkes-Skinner & Meredith, 1997). While family members are viewed as important sources of support, a study of 98 married mothers by Johnston and Swanson (2004) found that mothers seek support from peers, especially those with whom they have a shared context. This was a viewed shared by the mothers in this study.

[I'm] probably a lot more relaxed about some behaviours than if it was just me without that wider circle of people with kids exactly the same age, I would have thought it was only my children doing it, whereas I know that, okay, all the kids are wetting their pants or whatever behaviour it is, they're all doing it, and you get a bit of an idea on how to deal with it from other people (Vicky, one-on-one interview).

Especially when they were babies and you're learning milestones and things like that. [Playgroup] made me understand my child much

better. Things like teething, you know, she's got a runny nose and what soothers do I use and general things like that. And nappy rash. And things like activities, what activities I can do with my child, and role playing, and stuff (Mandy, one-on-one interview).

Playgroup is always useful for finding out something from the other parents that you don't already know, especially from people who have been coming to playgroup for a long time (Ella, focus group one).

Some [skills] come from other mums at playgroup, very much so, you know, well, [my daughter] hasn't eaten anything but peanut butter sandwiches for the last three weeks, anyone got any ideas on what I should do? Or, you know, she hasn't slept well, or you talk about their problem behaviour and you ask the others for practical solutions and my experience tells me that these people come up with practical experience much more than others. You know, gran and other well meaning people out there, in supermarkets you have everyone telling you what your child is doing wrong. Child health nurses are pretty good, but sometimes they tell you what they know they are supposed to tell you, they don't tell you what they truly believe. Sometimes the other mums are just the best place to get advice from (Naomi, one-on-one interview).

Naomi's opinion is reflected in findings from a range of studies (Bailey & Pain, 2001; Conway, 1999; Cronin, 2003; Folkes-Skinner & Meredith, 1997; Henderson & Lucas, 1981; Johnston & Swanson, 2004). New parents will often seek the support of family and peers rather than 'experts', however, this can further fuel the good mother syndrome. New parents today have both time and resource pressures, and have therefore become vulnerable to the belief that child rearing is a complex and precipitous business. Their instinctive feelings about their child's needs on every level can be undermined by conflicting advice from both 'experts' and groups of other mothers, which can result in oppression, whereby new parents lack confidence and surrender control to the professionals (McMurray, 1995).

Recent research indicates that parents are influenced in their parenting styles by contact with other parents at schools, preschools, child care centres and playgroup (Tucci, Mitchell, & Goddard, 2005). This is because such programs provide possible effective means for the extensive distribution of parenting information and support (Tucci, Mitchell, & Goddard, 2005). The women in my study reported that they are able to see what they want to be and what they did not want to be as a parent through observation at playgroup.

I've learnt... from a lot of people I've learnt from their mistakes, I haven't had to do their mistakes, I've already watched them make them and I know I wouldn't be like that (Meredith, one-on-one interview).

Well, it's not like you get a book and you have instructions, do you? I think [I learn from] watching other people with kids and talking about their experiences (Mandy, one-on-one interview).

That's where sometimes playgroup is, um, quite useful to see, sometimes just to see other children's behaviours and how the parents deal with it. Especially when they are older children, and you think right, next my child's going to be doing that, I look at the way they handled that, do I like the way they've done that and would I handle that differently, and, um. So I find watching other people parent particularly useful, just to work through it in my own mind, um, how best to approach things (Susan, one-on-one interview).

I think I guess you look at other people's parenting styles and think, well, I don't want that. Other people's experiences enhance your experience (Debbie, one-on-one interview).

Playgroup is a good way to talk to everyone about what you do, it makes you feel normal. We started off as a mother's group, so our kids are about the same age, so everyone is doing about the same thing, it can be behavioural or... the other day I was worried because [my son] was misbehaving and someone said maybe he's teething

because [my daughter] is teething, and that's it, we understand each other because we're all going through it (Stella, focus group two).

You have different ideas from different people, especially when they are babies, you have different ideas. You go about things with your children, or have different ideas, so they change things, yeah, a lot, because they don't stay on one track, sometimes they help you divert. Not that it's a diversion, maybe it's just someone that can put you on a different track with a different opinion, and maybe they help you to think of another way of doing things (Stephanie, one-on-one interview).

I can quite clearly see the people who have similar parenting styles to me and the people who are very different, and sometimes seeing someone, dare I say it, being a bad parent in my view, in my opinion, makes me stop and think about what I'm doing as well, so yeah, it does impact on my parenting, especially if I see someone doing something that I've done and think oh, I really didn't like that, it makes me stop and think about it (Susan, one-on-one interview).

Mothers often take the blame for their children's failures as they take the responsibility for their successes; the child's behaviour is seen to be the liability of the mother (Oberman & Josselson, 1996; Vejar, 2003). Child rearing is taking

place in an increasingly unsupportive framework in modern society, emulating the principal ideology of private parent responsibility (Ochiltree & Edgar, 1995). This, in turn, reinforces the notion of the good mother, rather than challenges it.

Exercising Expertise

Parents play a major role in structuring children's social interactions outside the home, but children also influence parents' social worlds by shaping involvement with family, friends and neighbours (O'Donnell, 1983). For example, parents seek out other parents at similar stages of child rearing for support; parents of children with additional needs, single parents and families that are culturally and linguistically diverse seem to gravitate towards each other (O'Donnell, 1983). Further, "mothering is a product of social negotiation between adults as well as between adults and children" (Blackford, 2004, p.244).

There have been studies of the role of parents, especially mothers, in children's play (Blackford, 2004; Damast, Tamis-LeMonda, & Bornstein, 1996), and while these studies refer mostly to public playgrounds, the similarities between these playgrounds and playgroups allows for transfer of ideological concepts between observed playground behaviour and playgroup behaviour. For example, playgrounds often encompass a random selection of families, whereas playgroup is an organised selection of families that meet at a predetermined time in a predetermined place. However, the unstructured play under parental supervision that occurs in the playground is a scenario that occurs at playgroups weekly. Hence, Blackford's (2004) interpretation of a group of mothers that objectify themselves through measuring children's behaviour to assess how well mothers

mother may have been referring to playground observations, but such observations could just as easily pertain to playgroup.

Blackford (2004) described how, when in groups, women try to corroborate their mothering and their knowledge through telling stories and asking questions, and reveal a need for cultural validation. For example, Blackford (2004) discusses how mothers devise elaborate systems of turn taking, and verbalise them frequently, such as 'only a few more minutes and then let Billy have a turn'; violations in sharing is an area that polarises parents, one stating something similar to 'that's not yours' and the other praising sharing behaviour; if a child hurts another, whether accidentally or purposely, the mother quickly apologises to the other mother. While children generally ignore them, the mothers are discussing and evaluating their values (Blackford, 2004). Further, parents serve as role models in providing information about appropriate behaviour in a range of settings and in certain activities (Smith, 1995). Mothering, clearly, is a result of social bargaining between adults as well as between adults and children (Blackford, 2004), and this is demonstrated at playgroups. For instance, Chloe noted:

Sometimes one of the kids is going through a phase, they're biting, or not sharing, or chucking a wobbly or whatever and, um, the mother gets all embarrassed and, you know, sorry, sorry, but we're like, no, don't worry, it's your kid this week, but next week it might be us.

Group Dynamics within the Playgroup

A theme that emerged from the interviews in my study is that the membership of the playgroup session determines group dynamics, and this, in turn, influences mothers' perceptions of what is a good mother.

I feel being more at ease in the playgroup when the other mothers have the same theories of parenting and how to best bring up our children as I do (Ella, focus group one).

Who you do playgroup with affects how you act. We as adults will gravitate to those that are similar to ourselves and to those that we feel comfortable around (Leonie, one-on-one interview).

Different people in the group can change how you feel about being a mother, I think. Some things you may hear from mums make you love and appreciate your kids even more than you already do (Melanie, focus group one).

You feel better as a mother when you see all the weirdness of other people and how they treat their child and you start thinking that maybe you're not doing a bad job after all (Stephanie, one-on-one interview).

Membership of any group determines group dynamics, so it is a reasonable assumption that different people will have a different effect on group functioning. Similarly, some people within the group might reinforce the good mother syndrome, while others might challenge it. Therefore, whether the good mother syndrome is reinforced or challenged at playgroup depends on who else is a member of the group. Most mothers in my study reported to feel more comfortable when they attended playgroup with like minded people.

Stage of Parenting

This current research argues that the effects of the good mother syndrome depends on the stage of parenting, where first time mothers are more concerned with the impression that they are exuding than mothers with two or more children. Mothers, generally speaking, are more conscious of a need to present themselves as a good mother when they first become mothers, whereas this need is reduced with subsequent children, as supported by the women with more than one child interviewed for this study.

I definitely think that I was more concerned about getting it right with my first child, because I had no idea what I was doing and I was concerned that others should think that I was doing it right, but by the time I had my third child I couldn't give a hoot what they thought (Leonie, one-on-one interview).

I don't think you are as fragile with your third, fourth as you are with your first child. I think it more comes with age that you don't care

what people think. However, in saying that, as a mother you are still trying to justify your child, you know, mood, crabbiness, behaviour, to other people throughout their age but I think you get tougher and get over things quicker (Stephanie, one-on-one interview).

I feel I was more concerned first time about what other mothers thought of my parenting first time around with [my daughter] as opposed to now that I have [my son] as well. I suppose people feel you have more experience with the more children you have so you naturally feel more unsure of your parenting styles with your first and whether other people would doubt them (Ella, focus group one).

It's really hard, especially with your first one, because there is more pressure, there seems more pressure to um, to go back to work and things when you've only got one, with two people are more understanding, yeah, you've got two and economically it might be better to stay at home sort of thing. But they look at it in terms of economics, not in terms of what is best for the kid (Susan, one-on-one interview).

In order to explore the idea that mothers are concerned about the impression that they are displaying as a mother to other mothers, I asked the first

time mothers focus group to “tell me what other mothers think of you as a mother”.

There was quite a long pause before the focus group participants began to speak.

I like to know what the others are doing. I was reluctant to join a mothers’ group at the start because I didn’t want them to know it wasn’t all sweetness and light, you know, and, um, sometimes I just don’t even get dressed until lunch time (Chloe, focus group two).

I always think other mothers know what to do, so I just pretend that I know what to do when I’m around them (Kendra, focus group two).

They don’t say anything, they’re just looking at you (Cassie, focus group two).

I think they think I’m a good mother. I hope they do because I go to a lot of trouble to pretend I’m a good mother [laughter] (Stella, focus group two).

I then asked if this also applied to the mothers at playgroup, whether they felt that they had to appear to be good mothers to their fellow playgroup mothers. Chloe probably best summed it up when she said the following.

Yes, of course it sometimes is, but sometimes we let ourselves be seen as we are, um, cos otherwise we can’t ask for help and things.

As we get to know each other better, it's easier, its, we're more likely to let our guard down, you know, but at the start, yeah, I wanted them all to think I knew what I was doing [pause]. I think it's, um, part of that self denial, if I pretend it's all okay, it'll be all okay (Chloe, focus group two).

Therefore, this suggests that one of the factors determining the strength of the good mother syndrome is the stage of parenting. It might be that the need to be perceived as a good mother would be stronger in a playgroup that consisted solely of first time mothers, rather than one that consisted of mothers with two or more children.

Geographical Factors

My research suggests that the third factor that can influence the impact of playgroup on the good mother syndrome is the geographical area that the family resides in. Previous research indicates that social status is linked to perceptions of competence (Berger, Cohen, & Zelditch, 1972; Berger, Rosenholtz, & Zelditch, 1980; Oldmeadow, 2007). For example, Oldmeadow's (2007) two experiments with 120 and 186 participants respectively, illustrated that people who have high status in one area (such as gender, age or ethnicity) are perceived to be more competent in areas that are unrelated to their domain of status. Oldmeadow (2007) refers to this process as status generalisation. It is possible, using status generalisation, that mothers who are deemed to have higher social status are perceived to be better mothers. This was supported by two mothers that were interviewed.

I suppose if you go to a playgroup in a lower socioeconomic area as you live it may mean that the parents are not as caring as yourself about how to bring up their children so this may influence how at ease you feel about socialising with them (Ella, focus group one).

I have a friend who says she wouldn't even go to a playgroup in [a Perth suburb] because she wouldn't subject herself to the pressure of being there because of the money differences, plus you would have to keep up with the Joneses and she didn't feel that she would have anything in common with them at all. They would be talking about what their doctor husbands were doing and she'd be saying, yes, my husband emptied a truck load of sand today (Stephanie, one-on-one interview).

However, Leonie and Melanie both disagreed that the suburb that the family resides in, and, presumably, the area that they attend playgroup in, would affect perceptions of whether someone was a good mother or not. They argue that there are good and bad mothers in every suburb.

People assume that if you live in a less affluent suburb then your parenting skills will not be as honed and refined than those of the elite suburbs because of the lack of money and social skills.... It doesn't matter where you live, you will always have an element of

people whose parenting skills are questionable whether rich or poor (Leonie, one-on-one interview).

If I were to attend an upper suburb playgroup I suspect things would be different, mainly the conversation between the mothers. I can't imagine being as relaxed as what I've been used to. Maybe thinking that their upper class makes them less approachable. I think any mother from any suburb, upper or lower, to have both good and bad parenting practices. A suburb alone cannot make a good mother (Melanie, focus group one).

Both Leonie and Melanie clearly believe that they know what is a 'good' mother and what is a 'bad' mother, but there is no evidence that they recognise the good mother syndrome as an ideology. Leonie elaborated on the point that economics can influence mothering in a practical sense, but not in an ideological sense.

I think that people from all suburbs know what is a good mother and what is not a good mother, they all know where the bar is set. But because of factors like money, some people might not have the resources they need to be a good mother, they might be poor and not be able to take their kids places or to buy stuff for their kids or to do the parenting programs.... It's not that they're a bad mother, they

just don't have the money to do things that rich people can do, but we all have the same idea of what a good mother is (Leonie, one-on-one interview).

The access to economic resources influences a mother's experiences, objectives and strategies (Arendell, 2000), and economic constraints can add stress to mothers, resulting in adverse outcomes for children (Zill, Moore, Smith, Steif, & Coiro, 1995). Participants in the current research suggest that it is unlikely that all the good mothers reside in certain geographical areas and the bad mothers reside in other geographical areas, and that what is perceived to be a good mother does not vary from suburb to suburb. However, the level of comfort between mothers can depend on a feeling of equality in terms of social and economic status. Whether the good mother syndrome is reinforced or challenged by playgroup can be to some extent determined by suburb, not because of ideological perceptions, but because of economic differences and access to resources.

Negative Experiences of Playgroup

Very few women I interviewed found playgroup a negative experience. Kelly initially reported that

Well, generally, I find it a bit stressful, as the session leader. And slowly learning myself how to run a session so that everyone helps out, almost equally, rather than the bulk of it falling on to me. This year it's been a lot better because I feel that has been sorted out,

and I've got a good group, so I feel as though I can spend time with my children.

However, when I contacted Kelly to ask more details about the stress surrounding playgroup, she qualified the statement by saying that

I actually find playgroup, generally, a very positive experience, I just get bogged down in the administrative side of things a lot of the time (Kelly, one-on-one interview).

Debbie told me when I telephoned her for an interview that she had decided not to return to playgroup, but she wanted to proceed with the interview. When I asked at the start of the interview why she had decided not to continue with playgroup, Debbie responded that

I had my third child, and he basically lived in the back of the car and I just thought that it would be better for him to have a sleep on one day a week, and I have a three and a half year old son, he now goes to day care because he missed out on the school intake because he was born [in] July, so he's going to day care to break the umbilical cord, he's getting the social interaction experience through day care without me being there, which is a big crutch for him. So I thought [pause] he's just never enjoyed playgroup, he's never enjoyed it all, so I thought why do it two times a week rather than just the one.

And I've been on the committee and I find it hard to hand it over, to let go of things, so it's better for me to just break away completely for a while (Debbie, one-on-one interview).

This is not so much a negative experience of playgroup as recognition that family dynamics had changed for Debbie, as well as awareness of her personal limitations. This was not the case for Julie, who reported a painful experience indicating lack of support in her early playgroup days.

I didn't go to playgroup for a little while, because it was just too hard. People seemed to look just after their own kids, which is fine if you have just one, but I've got two. The boys were going through an awful stage, where they just wouldn't leave me alone, they wouldn't get off my lap, and they cried the whole time, so I wondered if it was worth it. And when it came to being on roster, when I was making tea and coffee, that was really bad, because I'd put the boys down and they'd just scream and scream, and nobody would help me, or pick them up or anything. And in the end I said look, you're just going to have to do something, you're either going to have to look after the boys or take me off the roster, because it's just not part of my philosophy, letting my kids scream and be distressed while I make teas for all you lot (Julie, one-on-one interview).

These feelings of lack of support on Julie's behalf during her first experience of playgroup are underlined when she explains why she returned to playgroup.

I did go back because the boys still needed that socialisation, I didn't want them to know their cousins and each other and nobody else, so we went back and I found that it was different. And I think the difference has come because some of those mums have had their second babies now, and now they're seeing it, they are seeing how hard it is when you have two to look after, not just one, so they're a lot more supportive now (Julie, one-on-one interview).

In summary, this research suggests that playgroup serves one of three purposes for mothers: to establish and cultivate a sense of belonging; to search for validation as a mother; and, to claim and apply expertise. In addition, this research argues that whether the good mother syndrome is reinforced or challenged by playgroup also depends on three factors: group dynamics within the playgroup session; the mothers' stage of parenting; and, socioeconomic factors, such as social status and economic restraints. It is recognised that playgroup is not always a positive experience for all members, but in those instances, mothers will usually opt out, even if for a short period.

Chapter 5: "I'm not that mother": Identity

As I discussed in Chapter 4, women who remain childless are viewed as abnormal. To be childless – whether by choice or circumstance – can be challenging to one's identity as a woman (Maher & Saujeres, 2007). Women who are intentionally childless are often viewed as being unfeminine, as they choose to focus on career opportunities and self-pursuits, characteristics usually associated with men (Hird & Abshoff, 2001). While motherhood may not be the whole identity associated with women, contemporary motherhood in Western society is viewed as the most important role for females (Gillespie, 2001).

Loss of Identity

Women in this study reported that they experienced a loss of identity when they became mothers. This theme initially emerged in the one-on-one interviews with approximately half of the participants, so it was an issue that was explored in the focus groups. The idea that this loss of identity and transition issues might be more salient for first time mothers was supported to a degree. Some mothers in my study stated that the loss of identity was most salient with the birth of their first child, and reinforced with the birth of their second and subsequent children, which is supported by Nicolson's (1998) qualitative study of women and postnatal depression. In a similar theme, women in this study reported that:

When I became someone's mother, my identity changed. It's hard to describe myself as someone apart from in relation to my children. That became worse once I had the second baby. It's hard to imagine

myself as anyone apart from someone's mother (Ella, focus group one).

I don't like being away from my children. When I visit [my birthplace] I am happy to see my family, but I miss my children, I feel like part of me is missing. Like I have forgotten something.... I felt this when I had [my first child] but it is more now that I have two children (Megan, focus group one).

Further, the focus group one mothers stated that when the children became older, and less dependent, then the identity again shifted back to resemble that prior to having children. This suggests that transition to parenthood issues are more salient for first time mothers, but also that the loss of identity challenge is not reduced until the youngest child is older. That is, the experienced mothers focus group participants intimated that they experienced loss of identity with the birth of their first child, a position reinforced by subsequent children, but that the feeling of loss of identity slowly diminished with the growth of the youngest child.

You lose your old self and become someone's mother. Then when you have more children, that becomes even more true. But then, as your children get older, your identity shifts back again, and you get yourself back (Paula, focus group one).

When the children are smaller they depend on you more. I definitely felt even more like someone else when I had [my second child] but I can feel myself coming back now (Melanie, focus group one).

You might lose who you are for five years if you have just one child, but it can be longer if you have more children. It's when the youngest child gets more independent, and I don't have to watch her as much, then I feel like I can do my own thing more (Yasmine, focus group one).

While parenthood brings changes for both parents, the changes for mothers are greater than the changes for fathers (Choi, Henshaw, Baken, & Tree, 2005; Hays, 1996; Mauthner, 1998; Nicolson, 1998). New motherhood can be characterised by profound change, a strong sense of loss, isolation and fatigue (Rogan, Barclay, Everitt, & Wyllie, 1997), and the transition to motherhood has been identified as a psychologically vulnerable time for women (Seimyer, Edhborg, Lundh, & Sjogren, 2004). In previous generations, women had their role clearly defined; they mostly went from their father's home to their husband's home, and housework was their career (Maushart, 2000). Now women have more choice, but their sense of self is unclear. This is reinforced by views from the 'experts', because they indicate that good mothers put aside their identities other than those of mother and wife, so the interests of mother and child merge to one identity (Marshall, 1991).

Feelings of Loss of Power

Some of the women in this study expressed feelings of loss of power on becoming a mother, especially when they had previously focussed on career aspirations. This is demonstrated by the following comments.

So you go from being a very respected competent high up corporate position holder, high up position, to a person who second guesses what you do every day, constantly, so it's not very good for your confidence in some ways.... I think because a lot of parents are having their kids later they are achieving more, a greater confidence in their business or chosen career, they suddenly find... they think they can continue on in that way, and still carry on and juggle, nothing is going to change (Naomi, one-on-one interview).

I had my first child at 26, which I guess is not very young, my degree, and I've done Honours as well, so I guess I spent a lot of time developing my career and then working and I guess I have always been a very regimented independent person, so while I wasn't naïve thinking it was going to be a walk in the park, I don't think I thought perhaps it was going to be quite as challenging as it was (Debbie, one-on-one interview).

At my job, my job, I was the organiser, I told other people what they were doing, so, no, I wasn't happy to have this small thing suddenly being the one who told me what we were doing. At work I knew what was expected of me, then suddenly, who am I, what's going on? (Chloe, focus group two).

I was always very career minded and I wasn't going to have children, but I did. It was a shock to me.... I was important at work, very important, I held a high paying position and I was in charge, then all of a sudden, um, I have this person who can't even tell me what he wants and he seems to be in charge of me (Stella, focus group two).

In the 1970s, women were able to enter universities and careers that were previously reserved for men, but they also had to perform better than the men in their field to dispel the myths that they were too foolish, incapable, irrational or weak to do the job as well as men (Douglas & Michaels, 2004). Generally women were overachievers in the workplace and this was transferred to parenting. It has been suggested (Dally, 1982; Platts, 1999) that women lose significant aspects of their identity when they lose those things that made them who they are in the professional arena. There can be loss of power and identity that occurs with the birth of the first child when women have been successful in their pre-baby careers, particularly in traditionally male-dominated fields (Lewis & Nicolson, 1998; Lupton, 2000). The contribution to the work force is seen as important, and therefore the person sees herself as important (Platts, 1999).

Postnatal Depression

Full time mothers can also feel that they are contributing, however, their contribution is often child-centred, and, as such, is confined to directly affect a smaller number of people, perhaps (on average) two children (Platts, 1999). Although such contributions remain significant, they can seem less so when compared to the contribution made in paid work. Further, the transition to motherhood is portrayed as a shift that should occur easily, so when the realities of the responsibilities of motherhood emerge, mothers can become depressed and feel that they have failed themselves and their families (Vejar, 2003). Therefore, this loss of identity can be related to postnatal depression, because of conflict between expectations and the realities of motherhood (Mauthner, 2002; Shelton & Johnson, 2006), and it is not always diagnosed in a timely manner (Heneghan, Mercer, & DeLeone, 2004; Rice, Records, & Williams, 2001), if at all (Chaudron, et al., 2005). While four of the participants (three who participated in one-on-one interviews and one focus group participant) said that they had been diagnosed with postnatal depression, only two participants spoke about it. Their experiences, however, add some insight to the identity issues new mothers face.

I'm currently being treated for postnatal depression, so I've had a bit of a challenge thrown at me. [With my daughter] I didn't have it at all, but I still found it very hard, first-time parent, you know, all the usual huge adjustments to your life, but we had [my son] when she was 17 ½ months, she still couldn't communicate well, she was just coming to that toddler challenging behaviour stage and I added a

baby to the situation and my hormones went off and I was diagnosed with postnatal depression. Mind you, I wasn't diagnosed straight away, so although I talked to the doctor about it, it wasn't really picked up, so my path has been very, very hard (Naomi, one-on-one interview).

I suffer quite badly from postnatal depression, with all three of my kids, it must just be a "me" make-up thing. My first experience was a really horrid one, I can understand where that came from, the second two experiences haven't been too bad, but I felt myself falling into a hole regardless (Debbie, one-on-one interview).

The qualitative study of 12 Australian participants by Everingham, Heading and Connor (2006) found that postnatal depression was, in part, attributable to the perception that mothers knew how to mother instinctively, and the participants equated a less than perfect baby with less than perfect mothering. Further, Everingham et al. (2006) found that the feelings of anxiety in the transition to motherhood stemmed from changes in identity; the identity that the women had built up as successful women was being threatened.

Maternal Ambivalence

Some women in my study suggested that there was some difficulty in finding a balance between themselves and parenting. In the focus group with experienced mothers, Paula and Melanie expressed the following opinions.

I think it is all about balance, trying to be the person that you want to be while being the person that the kids need you to be and the one that your husband needs you to be, and the person that all your relatives want you to be, it's very hard keeping the balance (Paula, focus group one).

It's a very difficult balance, the person that you are, you need to be true to yourself but your kids need you, too, when they are young, and it is just hard to be someone who looks after herself, but to also be a good mother, something has to give (Melanie, focus group one).

These comments are supported by the data from Buzzanell et al.'s (2005) qualitative study of 11 mothers who spoke about the difficult balance in the multiple roles the participants held. Buzzanell et al. (2005) found that the concerns with work-family balance became more salient when the women needed to consider whether to have children, and at what point of their careers they might do so.

Loss of identity can result in feelings of fatigue as women cope with the physical demands of mothering, such as loss of sleep and lack of quality time to spend with their spouses, friends or alone (Oberman & Josselson, 1996). The paradoxical nature of mothering establishes maternal ambivalence (Arendell, 2000), as the rewards, satisfaction and responsibility of parenting contrast with the challenges, such as hard work and boredom (Nicolson, 1998).

Positive Experiences in Identity Change

This change in identity was not always viewed as a negative change by the women interviewed for this study, whereby some reflected, in part, positiveness towards mothering. Two of the first time mothers focus group participants commented:

I was glad to become a mother, I always wanted to be a mother, and I was ready to leave the old me behind (Cassie, focus group two).

I did feel a change in myself but not necessarily for the worse. It was just different. People treat you differently.... You go from being a single, to a couple, to someone's mother, and no one means to treat you differently, they just do (Stella, focus group two).

Women with children report greater meaning in their lives than women without children (Arendell, 2000; Ross & Van Willigen, 1996), and motherhood can be viewed as the key to adulthood (Woollett, 1991). The same societal expectations that define the good mother and fuel feelings of inadequacy and oppression can also give new mothers a sense of security and belonging, because being a good mother represents a normative adult role (Richardson, 1993). Further, a study of 'older mothers' by Raeff (1996) found that they valued motherhood, having someone to have fun with, and reported a sense of achievement when their child passed developmental milestones.

Stella's comment, above, demonstrates that she has not lost her identity, as such, but indicates that she identifies herself in relation to how others perceive her. This is a broad definition of who she is, and she lacks definition of individual strengths and who she might become in a distinctive way. This creates a crisis in personal identity because of lack of separation from others (Ortner & Whitehead, 1981; Platts, 1999). Therefore, "the work is deeply important, but something of value is also lost in the transition" (Platts, 1999, p. 193).

The transition issues for mothers are more prominent with the birth of their first child, though the birth of second and subsequent children reinforces the loss of identity initially experienced on becoming a mother. It is not until the youngest child becomes older that the loss of identity recedes. This loss of identity is more pronounced amongst women who had previously been successful in their professional careers, particularly if they have swapped that career for full time motherhood, and their autonomy becomes challenged. This loss of identity, however, is not always negative, because the societal expectations that define a good mother can give new mothers a sense of belonging.

Chapter 6: "You're damned if you do and damned if you don't": Support

Social support systems have been demonstrated as important for positive outcomes for families, as isolation from such systems can be associated with child abuse and neglect (Ceballo & McLoyd, 2002), especially amongst poor families (Garbarino & Sherman, 1980; Wandersman & Nation, 1998). Further, social support systems may hold protective factors against life stressors, enhance adult psychological well-being and therefore result in more positive parenting (Boyd, Diamond, & Bourjolly, 2006; Belle & Doucet, 2003; Ceballo & McLoyd, 2002; Green & Rodgers, 2001; Lavee, 2005). The importance of various support systems was recognised by most women in this study.

I need support as a parent, I couldn't do it on my own. My neighbour, her husband does fly in, fly out, and those women, I don't know how they do it, no wonder they look unhappy and tired all the time (Chloe, focus group two).

I'm lucky that my husband took time off work, when [my daughter] was first born. It was important in those early days, I really needed the help (Stella, focus group two).

However, some women reported that they feel unsupported in their role as mothers.

We are a close family, but not as close as a lot of people. Not as close as it used to be a long time ago. It's how things are (Meredith, one-on-one interview).

If there's ever a crisis we pay a babysitter, which in a crisis we've had to do. Generally the only support I sort of have is daycare, [my son] goes to daycare two mornings a week now.... We have our neighbours, but I don't like to push it too much. When [my husband] was in hospital for a week last year, we rostered. We worked around people's work obligations and how available they were, so we still needed a babysitter sometimes, especially at night (Kelly, one-on-one interview).

If my mum wasn't still working full time, it would be fantastic, she'd probably have [my daughter] for an afternoon, or for one day a week or something so I could clean the house without kids. In one day, instead of the whole week (Renee, one-on-one interview).

I want to give my children the best opportunities, I want to be the best parent that I can be, but I can't do all those things, it sounds great on paper, but it just isn't practical. So I can't ever be the parent I'd like to be (Julie, one-on-one interview).

There's a lot of pressure, even from within the family, you know, um, my family is always saying, someone in my family is always saying to me, so, you know, what did you do this week other than look after the children? (Susan, one-on-one interview).

Experiencing individual freedom and independence prior to becoming a mother can exacerbate feelings of isolation and of being cornered (Mirowsky & Ross, 2002; Raeff, 1996). Studies have indicated that mothers with higher levels of social support are more likely to be nurturing and consistent in their parenting (McLoyd, 1990). The size of social networks has been shown to be positively related to expressions of parental warmth (Ceballo & McLoyd, 2002; Mason, Cauce, Gonzales, Hiraga, & Grove, 1994) and more sensitive parental behaviours (Taylor & Roberts, 1995). Overall, positive outcomes are noted for families with social support systems because the enhanced psychological well-being for mothers facilitates healthy functioning in children (Orthner, Jones-Sanpei, & Williamson, 2004; Logsdon & Usui, 2006; Sroufe, Egeland, Carlson, & Collins, 2005).

Isolation

Linking to this perceived lack of support, a few women in my research reported that they felt isolation as a parent.

I didn't realise that once you became the mother of a newborn baby how isolated you are (Vicky, one-on-one interview).

I'm just stuck at home doing housework.... It's a bit depressing, it's lonelier [than going to playgroup] and there's not as much mental stimulation really (Stephanie, one-on-one interview).

This is supported by previous studies (Allan & Schultz, 1987; de Hoogd, Mitchell, & Tucci, 2003) that found that new mothers expressed feelings of being alone and isolated in their parenting experiences, and wanted an opportunity to share these experiences and concerns with other mothers. For example, de Hoogd, et al. (2003) surveyed 3500 parents from Victoria and Tasmania after parenting seminars, and 2950 returned their surveys. Of those respondents, 68% said they did not believe parenting came naturally, and 39% said they would find it difficult to ask for help if they were experiencing problems in their parenting. Indeed, almost 10% reported that they would not know where to ask for help if they needed it (de Hoogd, et al., 2003).

Lack of support sometimes came from the changed circumstances of being a parent, and new mothers can feel isolated from their peers; old relationships change, and new ones have not been formed yet (O'Donnell, 1983; Scott, Brady & Glynn, 2000), and friends who are not yet parents can have a different life perspective.

You gain a lot of friends but then friends that don't have children or friends that parent their children very differently it's very hard to keep in contact with, and you have to make a real effort (Vicky, one-on-one interview).

I have got lots of friends, but they are all single and in a different sort of life now. What I mean is that they are all single without kids, and I don't think they realise how hard it is, not just that we've got children now, but twins. I can't just go out for coffee, or dinner or whatever. And even my playgroup friends don't get it, really, because I can't just go out for lunch because I've got two of them to look after. It's hard, I can't just go to the beach, because I've got two toddlers to watch at the beach. It's not so easy for me, so I tend to just not go (Julie, one-on-one interview).

I thought I'd go out more, but who with? All my friends were at work, and I didn't know any new mums, so those early days, yeah, they were hard (Yasmine, focus group one).

Familial Support

Nicolson's (1998) study found a prevalent theme in that women felt let down by their partner. Research on spousal support indicates that women do not think they receive enough support from their spouses (Xu & Burleson, 2001), and that spousal support plays a vital role in marital satisfaction and parenting (Pasch & Bradbury, 1998). This is important to positive familial outcomes in that spousal support also has been linked to more positive parenting (Belsky, Youngblade, Rovine, & Valling, 1991; Johnston & Swanston, 2004). Three women in my study reported a lack of spousal support in child care and home duties.

I don't get any support from my husband as such during the day, basically because he's at work. Even later in the afternoon for after school activities, he's usually late at home and I can't usually.... He's available to me if I really desperately need him, but he's not there on a constant basis because of work commitments (Stephanie, one-on-one interview).

My views on parenting are that it is a very underestimated role, I don't think people know how hard it is, umm, it's a very under appreciated role, by society as a whole, not just governments, but husbands sometimes. I know he's a parent, too, but probably not as involved but it's such an important role in the development of the kids (Naomi, one-on-one interview).

My approach is softer and his approach is harder. The loudest voice usually wins, so he gets more attention. However, we're not meeting in the middle, that's just the way it is. But the different parenting styles, the obvious difference, increases my stress levels enormously. It is extremely frustrating that he continues to parent in a way that I find counter-productive and appears to be winning the battle (Leonie, one-on-one interview).

While my question to the one-on-one interview participants was not specifically about spousal support (“Tell me about the support you get from family and friends”) the above responses were from one-on-one interviews. No one-on-one participant reported spousal support. Most participants (one-on-one interviews and focus groups) reported examples of positive support from other family and friends, as discussed later in this chapter.

Calvert (2000) states that because of mobility, parents might not live close to family members, and also that because of mobility, social networks are not necessarily based around geographical neighbours. The lack of support experienced by women in this current study was also due to geographical isolation from extended family members.

I don’t have any family here, so I rely on my friends a lot more than I would if I had family here (Megan, focus group one).

It never bothered me before I had children, but now I realise that I am missing out on a lot of support, and how much family can support you if they are around (Kelly, one-on-one interview).

I personally don’t have any family here in WA, so I don’t have any support, you know, from that sense, and they were lovely people that we met at the [mothers’] group, we were all very diverse and very different, and I think that was part of the charm of the group, and we all clicked and we wanted to continue to meet, to give each

other support, and for the kids to be able to grow up together, so at that stage, that early stage it was really more for us than for them (Naomi, one-on-one interview).

Strong family connections are an important component in enhancing the well-being of children (Calvert, 2000). Further, the link between strong families and strong communities has been explored by various studies (Hughes & Stone, 2003; Shonkoff & Phillips, 2000). Therefore, geographical isolation from family members means that there can be an impact on positive outcomes for families and the community.

While social isolation has often been a problem for families living in rural and remote areas, it is now becoming an issue for city dwellers as they move away from extended family members and fail to make contacts in the new neighbourhood (Henderson & Lucas, 1981). Movement away from family members also means that it is less likely that new parents serve any “apprenticeship for parenthood” (Henderson & Lucas, 1981, p. 13), and sometimes the first baby born in the family is the first baby the mother has held. This was an issue raised by some of the women interviewed for this study.

Most people I know through work and through playgroup have family all over the world, they're not really supported in [the parenting] role. And... you're not one of eight children like people used to be, so you didn't grow up looking after your siblings or cousins or whatever. I

think people these days missed out a lot (Vicky, one-on-one interview).

I didn't sort of give too much thought prior to getting pregnant as to how I was going to bring these children up from there. I just wanted them to be healthy, and thought I'd work it out as I went along (Stephanie, one-on-one interview).

I think a lot in the past we learnt from our own parents and family, and there was a close network, but now with so many people moving around and being rather transient... I don't think a lot of people have learnt to be parents, even once they've had two or three children. I think there's a lot of strategies that they could have learnt, had they been in a family, and I think a lot of people are now just too willing to shove that responsibility on to someone else (Kelly, one-on-one interview).

I'm the oldest in our family, I'm the first one to have a baby, so I don't have um, that experience, I don't have a whole lot of people that I can... it's from people that I've gotten, met since through having [my daughter] that I've gotten things off, but I've also had to figure it out for myself (Renee, one-on-one interview).

I certainly didn't appreciate what went into, what went into raising kids. I hadn't had a lot to do with raising kids myself, I didn't avoid them, I'm the oldest and I'm the oldest grandchild, so I didn't have lots of other cousins around and because we moved away from where we were... I have had some experience but not heaps, but I just don't think that even a little bit of experience is the same as having them 24/7 type experience. No, I didn't appreciate how hard it was going to be (Naomi, one-on-one interview).

The significance of parents in children's early stages has been emphasised (Cicchetti & Toth, 1995; Phelps, Belsky & Crnic, 1998; Whitbeck, Hoyt, & Ackley, 1997), so that *ad hoc* approaches to parenting can be made to appear irresponsible (Golding, 2000; Harrison, Boyle, & Farley, 1999), as parenting becomes open to the scrutiny of professionals (Miller & Sambell, 2003). Not knowing what to do, as demonstrated by Renee, contrasts sharply with the ideology of the good mother, who reflexively knows what to do, because it comes naturally to women (Guendouzi, 2005; McLeod, 2001; Nicolson, 1998).

Perceived Support

There is value in support from female family and friends (Choi, Henshaw, Baker, & Tree, 2005; Cronin, 2003; Mauthner, 1998). Further, sometimes it is not the social support itself that is beneficial, but the perception of social support. That is, while support that is actually provided is helpful, the apparent availability of support, even if that support is not utilised, acts as a protective factor against stress (Cohen, 2004; Cohen & Willis, 1985; Jack, 2000; Xu & Burleson, 2001).

Most of the women in my study reported that they did not feel isolated as parents, and enjoyed a supportive environment from a variety of areas.

I'm pretty close with my mum, you know, we'll go shopping together or something... so they're very supportive of me.... The friends get together and we, you know, baby sit each other's kids, we might go to the zoo, or, we do a lot more than just playgroup.... When I was pregnant, going to doctor's appointments, someone will have the kids, or someone will pick the children up from school one day a week, and that sort of thing. Lots of support, and close by. They're only twenty minutes away (Vicky, one-on-one interview).

My mother-in-law, she is fantastic with [my daughter], she has a morning with her, where they do things together. That's the sort of thing I like, where I can have my time to myself (Mandy, one-on-one interview).

[My parents] are there if we need them, so if one of [the children] needs to go to the doctor and we don't particularly want to take the other one, um, then they come and sit with one while we take the child that needs to go. If we're just having a bad day, need a visitor, just to break the cycle, that's a big help. If I'm having a bad day and

I need a break just to get away they come and help (Susan, one-on-one interview).

It's great to have the extended family.... My son has just taken off with my mother-in-law, they spend a lot of time down there.... My kids have a lot to do with my husband's parents. And it's quite good, if I have an emergency, I can sort of say here you go, can you have such-and-such, and also if I'm going nuts and just need five minutes, they've been really great (Debbie, one-on-one interview).

Support is important as a parent, which we've probably all found [looked around at other focus group participants] and, yeah, we rely on each other a bit (Stella, focus group two).

Stella's comment underlined the importance of informal support, such as from playgroup members, which I discussed in more depth in Chapter 4. The importance of informal support was a salient finding in a recent qualitative research of 28 families by Duncan, Bowden and Smith (2006), which found that the opportunity to gossip with both staff and other parents in the three early childhood centres they studied was a key source of support for the families in their study. Similarly, the mothers in my study identified the ability to share information amongst themselves as an important source of informal support (see Chapter 4).

Two women in my study agreed that they had plenty of support from family and friends, but were reluctant to utilise it for a variety of reasons.

I have a lot of support, but I don't really use it. My sisters live close by, but I think the children are my responsibility (Leonie, one-on-one interview).

There's lots of people that I could ask, but, no, only if I really, really needed the help (Cassie, focus group two).

Family members can become too supportive in that they take over the mothering role, which makes mothers feel inadequate because they do not instinctively know what to do (Choi, Henshaw, Baker, & Tree, 2005). In a qualitative study by Mauthner (1999), it was shown that mothers have feelings of inadequacy when they have to ask for help, and Cronin (2003) reported that some mothers had difficulty in letting go of the baby when help was offered. Cronin's (2003) qualitative study of 13 first time mothers (aged under 25 years) found that generally support from family members, particularly maternal mothers, was well-developed and mutually beneficial, but some new mothers felt that their own mothers interfered too much and tried to force their own parenting practices.

Society expects mothers to know instinctively how to mother, but those for whom parenting does not come naturally may feel insecure in the mothering role (Bloomfield et al., 2005). Thus, attempting to adjust to

motherhood can be difficult, but admission of this to herself and others can incur feelings of inadequacy in new mothers (Choi, Henshaw, Baker, & Tree, 2005), and fears of being judged to be failing as a parent (Tucci, Mitchell, & Goddard, 2005). This was supported by the Mauthner (1999) study, where all participants were reluctant to ask for help and support because they felt that mothers should not need this.

Importance is placed on positive social support systems because they are directly correlated to positive family outcomes. New mothers' perceptions of spousal support are especially important. The geographical isolation from family members and friends reported by some mothers exacerbates the lack of experience that they might have with parenting. This challenges the good mother syndrome because good mothers should know instinctively how to mother; new mothers are therefore caught in a paradoxical situation whereby they are offered unsolicited advice from family and friends, and sometimes complete strangers, as well as 'experts', yet on the other hand they are expected to intrinsically know how to be a good mother.

Chapter 7: "I do feel that pressure": Expectations of Mothering

In Western societies, women live against a milieu of personal and cultural beliefs that they want to be mothers (Nicolson, 1998; Shelton & Johnson, 2006). This 'longing' is set within the good mother syndrome, whereby the good mother is committed to her children and her maternal role, and any ambivalence felt is indicative of some flaw in the woman (Marshall, 1991). An atmosphere is promoted in which discrepancies exist between the ideologies of motherhood and the real experiences of women (Arendell, 2000). This can be challenging for first time mothers especially who have to resolve the gap between their idealised expectations and the lived actualities of mothering (Shelton & Johnson, 2006), and there is a lack of alternative discourses for women to extract in creating their experiences (Choi, Henshaw, Baker & Tree, 2005). Most of the mothers interviewed for this research spoke about how more challenging parenting is compared to their perceptions prior to having children. This was a theme that emerged from the one-on-one interviews and was supported by participants of both focus groups.

I don't think I fully grasped how little I would be able to get done in a day, because I have to keep stopping and starting jobs. I haven't been able to finish something. So I had to readjust the way I think because I was getting very frustrated (Kelly, one-on-one interview).

I didn't realise... it's a 24 hour job, but I didn't realise it would be a 24 hour or one in 24 minute roller coaster. The physical job doesn't phase me, but the emotional roller coaster of especially, not so much now, but at the beginning, you know, when we were just that new mother's group, of just how bad a bad day would be, you know, and how in thirty seconds your very good day could go very bad and vice versa. And you think, you think when you're having a bad day that that is the end of it, that it is never going to get better at the beginning (Vicky, one-on-one interview).

I thought I had it all pretty well worked out. Then I found that I was having twins and so that changed in some respects.... I didn't get to have one child and that one on one time that you can enjoy, and then introduce another child, I just had, bang, an instant family. So it was very hard from that respect. I had this ideal of what a mother would be like, and I've had to make compromises, because I have twins, I can't quite be the mum I'd like to be (Julie, one-on-one interview).

You think you're a patient person before, but when you have a child you realise you're not... you have to be much more patient as a person when you have children (Kendra, focus group two).

It's very different to what I thought it would be, although I had a lot to do with children through my work as a child care worker, I had no experience of the emotional ride you get 24/7 (Chloe, focus group two).

I was quite comfortable with it, of course I thought that I could cope with everything, I could cope with everything thrown my way, but I don't think you are ever prepared for what motherhood is really going to be like (Naomi, one-on-one interview).

It was more challenging than I realised it would be. It seems to be based on extremes, you know, from one extreme to another. You either have a very good day or a very bad day, and there doesn't seem to be anything in between (Paula, focus group one).

The only participant who actively disagreed that her expectations did not match the reality was Renee. In her one-on-one interview, Renee said

I thought it would be a challenge, but not, not a really hard challenge, um, I'd worked with children and stuff before, I've done half a primary teacher's degree, and did work experience and that sort of thing, and I've always loved children, so I wasn't really, I wasn't completely, like, I wasn't, I kind of knew what sort of a little what I

was in for.... Some things have been harder and some things have been easier (Renee, one-on-one interview).

The media and popular literature present an unrealistic version of happy families (Choi, Henshaw, Baker, & Tree, 2005; Lewis & Nicolson, 1998; Marshall, 1991; Weaver & Ussher, 1997). The intertwined myths of happy families and the good mother are perpetuated through magazines, parenting books, marketing and media coverage of celebrity mothers (Collett, 2005; Douglas & Michaels, 2004). Participants in the Lewis and Nicolson (1998) study reported feelings of anger at having been conned by the myth of happy families that has been portrayed in the media. These results were supported by the Choi, Henshaw, Baker and Tree (2005) study of 24 UK women, which found that expectations of motherhood were based on dominant mothering ideologies surrounding 'happy families', and that these expectations did not match the reality for first time mothers. The implications of these results is that, like previous studies (Choi, Henshaw, Baker, & Tree, 2005; Lewis & Nicolson, 1998; Marshall, 1991; Weaver & Ussher, 1997), the women expressed that they are aware of a mothering ideal which is unobtainable, and does not match the reality of mothering. This discrepancy between expectations and reality does not become apparent until the first baby is born.

Stay-at-home Mothers Versus Employed Mothers

Some women who were interviewed commented on the apparent void between stay-at-home mothers and those who undertook paid work. This was especially a point that was raised at the experienced mothers focus group that

generated further discussion, but was also a point that some one-on-one interview participants raised.

I think that mothers – full time mothers – are undervalued by society and by the government. For instance, the federal government has just announced an increase in child care places. What are they telling us? That you are only valid as a person if you are able to work, that you are nobody if you are a full time mother, that we should all be out working? (Paula, focus group one).

I just feel that sometimes you are put down as a mother for not working, either full time or part time. People always ask what you do for a living and when you say that you are a mother, I think that is where you are open to being put down (Stephanie, one-on-one interview).

I think that women's liberation has done a great disservice in a way, because it is put out there in the media that women are these super heroes, that they should be wife, mother, career person and all the rest... and you know, that this has initially come from women themselves by trying to do too much, that too much is expected there. And you can't do everything. Not well, try as you might (Kelly, one-on-one interview).

I work, but that doesn't mean I'm less a good mother just because I put my child in childcare. Some people will think because I put my child into care that it's bad mothering, but it's not (Stella, focus group two).

[There is] pressure on mums to go to work, to go back to work. That's the main one that springs to mind. The whole stay-at-home issue. Umm, there's also, you know, pressure to put your child into childcare or not, even if you're not working (Renee, one-on-one interview).

If you stay home as a full time parent and that's all you do, then um, people think that your life isn't full enough or isn't being fulfilled, that your child can't fulfil your life, that you have to have something other than your children. If you go back to work and put your children into daycare, then people say well what's the point in having children if someone else is looking after them. So, I think you're damned if you do and damned if you don't (Susan, one-on-one interview).

Mothers today are caught between two competing ideologies, one which adulates parenthood (and therefore rejects the idea of mothers returning to paid work) and one which considers paid employment as the only valid and legitimate

occupation (McMurray, 1995). Balancing the needs of work and family is not new, but Tucci, Mitchell and Goddard's (2005) survey of 501 Australian parents confirms that it is an ongoing issue that has not been resolved for families, a situation supported by Tucci, Mitchell and Goddard (2004) and Buchanan and Thornthwaite (2001). There appears to be a general feeling that stay-at-home mothers will "redeem family values and restore morality to our citizenry" (Thurer, 1994, p. xviii), so the really good mother is a full time mother, who nurtures her family and considers care giving to be more fulfilling than paid work (Buzzanell, et al., 2005; Johnston & Swanson, 2006). The perception is that working mothers, faced with the image portrayed by the media as being neglectful of their children and endangering their emotional development, desperately attempt to be 'supermums' who can juggle a career and motherhood while maintaining a blissful marriage (Collett, 2005; Hays, 1996). Stay-at-home mothers, in the meantime, are immersed in the ideology of the good mother, aware that her success is measured by her child's achievement (Collett, 2005). Even if mothers are in full-time paid employment, the ideological expectation of the "always there good mother" still exists (Phillips, 1991, p. 192; see also Johnston & Swanson, 2006).

The findings from Johnston and Swanson's (2004) study of 98 married mothers, whereby both stay-at-home mothers and employed mothers feel that culture is more supportive of the other mothers, is consistent with the findings from my study. The mothers in my study have expressed a view whereby work status (stay-at-home mothers or employed mothers) and mothering ('good' mothering or 'bad' mothering) are construed as culturally constructed rigid binaries, where the options are mutually exclusive (Johnston & Swanson, 2004); that is, a mother is

either stay-at-home, or in paid employment, either a good mother or a bad mother. There appear to be no 'shades of grey', such as the possibility that circumstances determine whether the same woman can sometimes be a good mother or sometimes a bad mother, or that she might work in paid employment on a part-time basis and therefore be, for part of the time, also a stay-at-home mother. Further, Johnston and Swanson (2004) found that women used employment status as a measurement of good mothering, whereby stay-at-home mothers described the ideal mother as always accessible and present (thereby excluding employed mothers), and employed mothers stated that happiness of the mother is paramount to the happiness of the child, and that such happiness is derived from multiple interests and roles outside of motherhood. For example, Peyton, a stay-at-home mother, noted the following.

A good mother does everything for her child and, um, stays home with her child to do things together.

In contrast, Stella, an employed mother, said:

People think that by staying home all the time, you're being a good mother, but you're not. You can work and be a good mother.... You don't have to be there 24/7 to be a good mother.

Villani and Ryan (1997) conducted a study that compared the experiences of mothers in 1978 to those of mothers in 1995. This was not a longitudinal study,

but compared two separate groups of mothers. Participants in the 1995 study gave up a full time career in lieu of motherhood, believing it was in the best interest of the child or children. The women in the 1978 study stayed home as they identified with the woman-as-mother image embedded within their psyches, whereas the women in the 1995 study actively chose to stay home as a "form of maternal altruism" (Villani & Ryan, 1997, p. 98). They relinquished their professional and personal goals to meet the community's expectations and their own expectations of what a good mother should be. In both the 1978 study and the 1995 study, the majority of women said that they chose to stay-at-home full time after becoming a mother "out of principle or because they thought it was best for the children" (Villani & Ryan, 1997, p. 123). This is supported by research that shows women believe that mothers are the best caregivers of small children (Lupton, 2000; Probert, 2002).

In the late twentieth century, motherhood and career have been presented as two separate and distinct paths (Schwartz, 1993). Women have been socialised into wanting more than full time stay-at-home mothering, but they are "obliged to subordinate their personal objectives by an ideology that insists that unless they do, they will damage their children for life" (Thurer, 1994, p. xxiv). Summers (2003) notes that since the late 1990s in Australia, women have been pressured to have children through industrial, welfare, childcare, taxation and legal changes, but they are still without paid maternity leave, which ultimately limits women's options. However, both working mothers (who are seen to neglect their children) and stay-at-home mothers ('just a mother') fail in their roles; stay-at-home mothers have lower status, but stand on higher moral ground than working mothers (Douglas &

Michaels, 2004). The term 'working mother' is a double edged sword; it implies that childcare is not work, and its use as a derogatory term implies neglect of maternal duties (Lewis, 1991).

Participation in the paid workforce has partly contributed to women having fewer babies and to women being older before they have children (Lupton & Schmied, 2002). Lupton and Schmied (2002) hypothesise that these tendencies are a result of the decision by women to establish a career and to participate in the workforce prior to having children. Family planning now affects women's career choices in a way that does not affect men (Donelson, 1999).

Hakim (2000; 2003) theorises that there are three distinct groups when discussing family and paid work combinations: the home-centred women are full-time stay-at-home mothers and they prefer not to work; work-centred women prioritise paid work; and, adaptive women want to combine family life with paid work, but are not committed to a career. Other researchers (Himmelweit & Sigala, 2004; McRae, 2003) have criticised Hakim's model for being too simplistic and not taking into account possible change in attitudes. For example, Himmelweit and Sigala (2004) argue that Hakim (2000; 2003) suggests that women have a choice regarding whether they are stay-at-home mothers or not, whereas the reality is that some women are unable to work in paid employment (for example, due to lack of adequate childcare facilities), and others are unable to be full-time stay-at-home mothers (for example, due to financial constraints).

As stated, Hakim's (2000; 2003) theory regarding mothering and paid work combinations assumes that there is an element of choice in whether the mother works outside the home or not, but the decision by women to work outside the

home is not always based on ideology. A dual income is fiscally essential for many families (Doorewaard, Hendrickx, & Verschuren, 2004), and the decision for the woman to work outside the home can be centred on a financial need, which can add to the pressures that some mothers already feel. For example, Stella noted that

I enjoy going to work, I would probably work no matter what, um, at least, um, part time, but it, it's probably not really an option for me to stay home now anyway, you know, with all the costs of families and things (Stella, focus group two).

Finally, there is the reality that some women genuinely enjoy working outside the home, and obtain feelings of self worth in that role (Donelson, 1999; Doorewaard, Hendrickx, & Verschuren, 2004). Research shows that employment offers intrinsic rewards, such as increased self-esteem, and socialisation with other adults (Fagan, 2001), and, conversely, that women who are full-time stay-at-home mothers that desire employment outside the home experience low self-esteem, higher rates of stress and depression and less satisfaction in the mothering role (Hock & DeMeis, 1990; Lee & Gramotnev, 2007; Pistrang, 1984; Renda & Hughes, 2004). It is possible that some women would work in paid employment without regard for the financial rewards offered.

Hochschild (1997) argued that parents who are dissatisfied with their home life work longer hours outside the home. She found that both mothers and fathers were more satisfied at the workplace, which was perceived as an orderly and

controlled environment, than at home, which was a place of household chores and demand from family members (Hochschild, 1997). In comparison, Brown and Booth's (2002) analysis of 1533 parents' work and family satisfaction did not support Hochschild's findings, concluding that those that are dissatisfied at home do not work longer hours. However, there is evidence that work is a significant source of identity for mothers (Crouch & Manderson, 1993; Frydman, 1987; McKenna, 1997; Walter, 1986).

Public Scrutiny of the Good Mother

Apart from impossibility of achieving balance between expectations of whether the good mother should stay-at-home or be employed in paid work, there are expectations of how a good mother should act both in private and public. In response to my interview question about community expectations and where they come from, most women in my study expressed that there was an expectation placed on them on how they were supposed to act as good mothers, particularly in the public environment.

Older people are less tolerant of kids, and you're always aware that they don't want them running around, and they don't want them making a noise, and [pause] you're conscious that you want to try and sort of keep them in line for society, as well as [pause] society is only going to tolerate a certain amount (Vicky, one-on-one interview).

Some people don't say anything, but you can see how they are looking at you, they don't need to say anything (Cassie, focus group two).

You only have to look when you go to the shopping centre, if a mother raises her voice, you see people turning around and thinking well, if she's like this at a shopping centre, what is she like at home. It even goes down to the way that you dress. How you speak to the kids, a lot of people analyse you as to how you present yourself (Leonie, one-on-one interview).

They either don't have children or they have forgotten because I don't know, they must see these children on TV and they are fantastic. And they expect children to be like that all the time, these children on ads that sing for their breakfast, where are they? If there's any mothers out there who doesn't lose the plot occasionally, I'd like to know what anti-depressants they are on or whatever they are on... because... I've seen every mum go troppo every now and again (Meredith, one-on-one interview).

You definitely feel the pressure when you're out with your children and they're mucking up, you feel the pressure from society to act in a

certain way, which wouldn't necessarily be the way that you'd act at home (Vicky, one-on-one interview).

In Chapter 5 I discussed identity issues for new mothers. These experiences of personal identity for new mothers can be linked to the expectations of the community, and vice versa, through identity theory (Burke & Stets, 1999; Cast, 2004; Cast & Burke, 2002). Briefly, identity theory suggests that society assigns expectations to different roles, and that identity is a subjective reflection of who one is as an occupant of a particular role (Cast, 2004). When the expectations of the role, and therefore the community, do not match the personal expectations of the self in that role, the incongruence adds pressure to the individual (Cast, 2004). In context, if mothers have an idealised vision of what a good mother should be, which most likely is established and perpetuated by society, then mothers will be pressured to conform to those expectations (Stets & Cast, 2007).

There can be a concern amongst new mothers to be seen as bringing up perfect children, which results in the inclination to focus on how others perceive you as a parent. This is supported by Bloomfield et al.'s (2005) qualitative study of 70 mothers, which found that mothers were often comparing themselves to other parents and were concerned with portraying themselves as competent mothers while in public.

Private Scrutiny of the Good Mother

Some of the expectations placed on women as mothers come from friends and family members. The qualitative study of 70 focus group participants by Bloomfield et al. (2005) found that mothers were pressured to meet other people's

expectations. Further, Bloomfield et al. (2005) found that there was pressure from family members, particularly in-laws, to do things differently. These results are consistent with my study.

I always watch out for what other people think, you always are mindful of what they are thinking. Or you watch what your friends are doing and do that, if that's what they are all doing. And the in-laws! They always have an opinion (Stella, focus group two).

I sometimes get it from other people as well, if anything, I don't tell opinionated people what I do, I tell my best friends, but some people that are very good friends show their opinions quite strongly, so I wouldn't tell them what I do because I know how I'm going to get it back from them, and that's going to send me off into a state of panic all the time, wondering whether I should be doing this with my child, whereas no, I'm strong enough, I should know what is right for my children (Stephanie, one-on-one interview).

I found it's people who don't have children who have the most opinion. The old aunties and cousins without kids, they're all experts! (Cassie, focus group two).

As discussed in Chapters 2 and 4, the standards set by the good mother syndrome can be so high that they are impossible to achieve. As a consequence, many mothers feel a sense of guilt and insecurity about their mothering (Brown, Small, Lumley, & Astbury, 1994; Cannold, 1998; Eyer, 1996; Maushart, 2000; Morell, 1994). The themes of guilt and mothers' unmet needs was a salient finding in the present research.

Feelings of Guilt, Frustration and Resentment

Some mothers in the focus groups expressed feelings of guilt in their parenting role. This was not in response to a specific question, but stemmed from other discussions that were taking place within the focus groups.

When you decide to bottle feed you are made to feel guilty about it. I didn't know that that would be just the first time I was made to feel guilty as a parent (Peyton, focus group two).

I feel guilty almost every day about something. Am I making the right choices for my children? What if I'm not? There's so much pressure on being the perfect mother that I'm worried I'll get it wrong (Melanie, focus group one).

Of course, you are made to feel guilty about going back to work, like it means I'm not doing the right thing by my child or something (Stella, focus group two).

This last comment by Stella is a reflection of the debate surrounding good mothers and paid employment, as I discussed in Chapter 7. A qualitative study of 50 Australian parents in the 1990s by Lupton and Schmied (2002) found that while there was still support for equating good mothers with stay-at-home mothers, there was evidence that this notion was weakening for several reasons. Predominantly, the guilt and ambivalence that mothers felt on returning to work was waning in Lupton and Schmied's (2002) study, which was supported by some previous qualitative American studies (for example, Bailey, 1999; Hays, 1996; Uttal, 1996). Lupton and Schmied (2002) reason that this change in attitude is due to a growing acceptance that women's identities can be tied to involvement in paid work. My study suggested similar findings; that while good mothers were associated with being a full-time stay-at-home mother (and, by default, a 'bad' mother was one who returned to paid employment), the mothers that were in paid employment were not apologetic about their employment status.

Julie expressed not guilt but frustration at her perceived inability to "be the mum I'd like to be" because her first pregnancy resulted in twins, because she did not "get the luxury of being a mum to one child only". She elaborates:

One book I'm reading was saying how you should spend time with your child as a one-on-one for at least $\frac{3}{4}$ hour a day, which is a really good idea. But I've got twins, how can I do that, and what do I do with the one that I'm not interacting with? I suppose I could get someone in to help, and, strangely, the book suggests just that, but

for a continuous thing, where are all these people coming from?

(Julie, one-on-one interview).

Julie was clearly annoyed by the circumstances she found herself in; her ideology and expectations led her to believe that motherhood would bring one set of circumstances, whereas the reality had delivered another. This frustration is associated with the variance between expectations of motherhood versus the reality, which I discussed in the previous chapter.

People can remain fixed on how children were brought up in previous generations because it is how we were brought up, and this influences the way that they raise their own children (de Hoogd, Mitchell, & Tucci, 2003; Tucci, Mitchell, & Goddard, 2004; Tucci, Mitchell, & Goddard, 2005). Therefore, there can be ambivalence about day care, convenience foods, disposable nappies and family composition, because these things have changed from previous generations. It is not that women today refuse to use day care, convenience foods or disposable nappies, nor that they want to outlaw single children, divorce or separation, but that they are made to feel guilty about these things (de Hoogd, Mitchell, & Tucci, 2003; Maushart, 2000; Tucci, Mitchell, & Goddard, 2004; Tucci, Mitchell, & Goddard, 2005). In addition, the good mother is selfless, which is why they feel guilty when returning to paid work; they have violated their maternal duty because they have directed their energy away from the home (Harris, 1995). It was evident with a few women that they felt resentment rather than guilt towards their role as mothers.

When the children were little I did feel resentful towards them sometimes. My friends would be going out for lunch or coffee, and I couldn't go because I had a small child to look after, and I resented missing out (Leonie, one-on-one interview).

I've had days where I resented [my daughter]. I had a career that I enjoyed and now I'm here. Things might have been different (Peyton, focus group two).

Sometimes it is hard always putting yourself last, and you wonder how long it will go for. But, then, you sort of know that you are going to have to make sacrifices for a while when you become a parent (Melanie, focus group one).

As I discussed in Chapters 2, 4 and 5, women who choose to remain single and childless are considered "abnormal and deviant" in the community (Maher & Saujeres, 2007, p. 6; see also Choi & Bird, 2003; Hird & Abshoff, 2001; Letherby, 2002). All women who are married, or in a stable heterosexual relationship, are assumed to want to have children; the decisions appear centred not on whether to become mothers or not, but on how many children to have, and when (Dever & Saugeres, 2004; Gillespie, 2000; Woollett, 1991). One woman interviewed in this study talked about the pressures to have children.

I was talking to a friend about whether you would choose to have children again if you were given a taste of what it was like with them. In isolation I love my kids, I really love them, but by the same token, all the work that's involved with them and hoping you've done a good job at the end when it's too late to do anything about it, maybe it would be easier not to have them. Maybe that's selfish, I don't know. It's hard because you're never ever going to have a taste of what it is like and then change your mind, it's almost as if society puts pressure on that you must have children, and maybe that's wrong (Debbie, one-on-one interview).

In order to raise children right, it had to be done according to the experts; however, there is no evidence that such information makes women better mothers (Kitzinger, 1992). Despite this, the concept of the ideal mother remains pervasive, and is reinforced by not only expert advice, as discussed in Chapter 2, but also media and culture. The stereotypical white, middle-class, stay-at-home mother is still prevalent in films (Wiersma, 2001), advertisements (Charles & Shivas, 2002) and magazines (Johnston & Swanson, 2003). One study (Wiersma, 2001) found that gendered images in Disney films have not significantly changed since *Snow White* was released in 1937, and mothers in Disney films are mostly depicted as primary caregivers and protectors (Tanner, Haddock, Zimmerman, & Lund, 2003). Magazines imply that stay-at-home mothers would be happier if they were more competent at mothering (Johnston & Swanson, 2003). With such pervasive examples of good mothers permeating their collective sub-consciousness, it is little

wonder that some mothers feel guilty when they are unable to meet those expectations.

Unmet Needs

The study of 70 British mothers by Bloomfield et al. (2005) found that mothers often have difficulty juggling everyone's needs and therefore neglect their own needs. A small number of women in my study said that their own needs were not fulfilled.

Sometimes I'd really like my old life back for the simplicity, I think the constant, you know, worrying about them, you know you don't switch off from them, so you're always looking out for their best interests.... You go out but you can't quite relax because you are waiting for your phone to ring to say she's hungry, come back (Susan, one-on-one interview).

Your needs as a parent might be fulfilled, but not your needs as a woman.... You're left last, you forget about yourself and put their needs first, um, you do the kids, you do the hubby and then you're left at the end. You don't really have time to worry about your needs (Peyton, focus group two).

The Weaver and Ussher (1997) study of 13 mothers showed that the self sacrifice of motherhood was both exhausting and distressing. These results were supported by Choi, Henshaw, Baker and Tree's (2005) interviews with 24 women,

who reported stress in trying to keep up with the 'supermum' ideology. Any perceived violation of maternal duties can lead to guilt, and there are many examples of where and when new mothers can be made to feel that they have violated their maternal duty, through a failure to be a good mother. Further, the good mother syndrome can lead mothers to overlook their own needs while tending to the needs of other family members in pursuit of being a good wife and mother.

The reality of motherhood does not always live up to the expectations held prior to becoming a mother, which are permeated by unrealistic portrayals of mothers in popular culture and media. Women feel betrayed by the myth of the good mother when they find that what they expected motherhood to be like is not translated into reality. Additionally, women have to contend with a dichotomous culture which places mothers in one of two competing dyads, the working mother or the stay-at-home mother, neither of which can ever fulfil the expectations placed on them by the social construction of the good mother syndrome. Apart from public scrutiny of women's mothering skills where she is judged by her child's physical characteristics, clothing and behaviour, mothers have to contend with the opinions of family members and friends, some of whom always seem to know a better way to mother in all situations.

Chapter 8: Conclusion

This final chapter summarises the findings of my study. Firstly, I restate the research aims and questions. Next, I address the research questions. Specifically, I discuss mothering in Western Australia in the 21st century, the transition to motherhood, the good mother syndrome and playgroup, and the implications for service delivery. I then discuss strengths and limitations of the research, and finally, I suggest possibilities for future research.

Aims and Research Questions

As stated in Chapter 1, this study provided the participants with an opportunity to voice their experiences, thoughts and feelings on mothering and playgroup. The study aimed to explore the lives and experiences of the 21 women who participated in the study, and to hear their perceptions of the relationship, if any, between playgroup and mothering.

The research questions were:

1. What are the salient experiences of mothering in Western Australia in the twenty-first century?
2. Is the challenge to identity more salient with the birth of the first child? How is this phenomenon affected by the birth of subsequent children?
3. Why do mothers in Western Australia attend playgroup? Does playgroup affect the experience of mothering in Western Australia? In what ways does it affect the mothering experience? Does playgroup reinforce or challenge the good mother syndrome?
4. What are the implications for service delivery of playgroups and other parenting programs in Western Australia?

Mothering in Western Australia in the 21st Century

In Chapters 5 to 7 I discussed mothering in Western Australia in the 21st century. In each of these chapters, the primary themes centred on identity, support, expectations of mothering and guilt. Predominantly, the women in this study described their overall parenting experience as positive, which I discuss further below. In Chapter 5, I discussed identity and demonstrated that the participants felt that loss of identity and loss of power issues were more salient when the children were very young, and that as the children got older, the mothers were able to reconstruct their identities as separate from their children. This was particularly true for women who had more than one child; these women described their identity loss as less intense when their youngest child got older. The connection between loss of identity issues and postnatal depression generally concurred with the literature (Platts, 1999; Shelton & Johnson, 2006; Vejar, 2003), although this finding is limited by the fact that only two participants spoke about their postnatal depression (although four said that they had been clinically diagnosed). Interestingly, two participants spoke about identity changes as being very positive; one participant welcomed the change, and the second identified it as not necessarily negative or positive, but inevitable.

In Chapter 6, I discussed the support mothers received in their parenting role. Most of the women recognised that support in the early days of mothering was vital, but some felt that they did not receive the support from family during that time, and felt quite isolated in the early stages of parenting. This is supported by recent literature (de Hoogd, Mitchell, & Tucci, 2003; Johnston & Swanston, 2004; Xu & Burleson, 2001). The majority of women in my study said that they received a

lot of support from family and friends as the children got older, and as more children joined the family, and that a lot of this support came from playgroup friends. In line with the literature surrounding the topic (Milkie, Bianchi, Mattingly, & Robinson, 2002; Nicolson, 1998; Xu & Burleson, 2001), most of the mothers in my study reported that they did not receive the level of support that they wanted from their partner, no matter what stage of parenting they were at.

I discussed expectations of motherhood in Chapter 7, and the overwhelming response from all participants was that being a mother is challenging. Specifically, most of the women supported the findings of recent studies (Arendell, 2000; Choi, Henshaw, Baker, & Tree, 2005; Collett, 2005; Shelton & Johnston, 2006) and said that their expectations were markedly different from the reality of parenting, and that while they expected it to be challenging, it was much more difficult than they anticipated. The discussion around the dichotomy between stay-at-home mothers and mothers in paid employment was discussed with mixed options emerging, depending on which of these two categories the women fell into. They all agreed, however, that it seemed to be a no-win situation, and, in line with the literature (Buchanan & Thornthwaite, 2001; Buzzanell, et al., 2005; Collett, 2005; McMurray, 1995; Tucci, Mitchell, & Goddard, 2004), articulated that stay-at-home mothers were undervalued and mothers in paid employment were often misunderstood. In addition, this chapter discussed the public and private scrutiny of mothers, with most agreeing that they are expected to live up to an impossible standard of how a mother is supposed to look and act.

In the final results chapter, Chapter 7, I discussed feelings of guilt and unmet needs, and explored the issues raised by some mothers around feeling

guilty in their parenting role as they felt they were not always doing the best thing for their child or children. Additionally, some mothers in my study stated that they resented that their lives had been changed by motherhood, and that they had unmet needs of their own. The literature generally supports the view that neglecting their own needs is both exhausting and stressful for mothers (Choi, Henshaw, Baker, & Tree, 2005; Weaver & Ussher, 1997).

Generally speaking, despite their doubts, most of the women in this study were happy in their parenting role. They indicated that mothers are undervalued in society, acknowledged that there was public and private scrutiny of mothering practices, identified variances between prior expectations and the reality of mothering, commented that there were identity issues on becoming a mother, felt guilt in their mothering role, and stated that mothering was a challenging and difficult job, but felt these challenges were worth it. Women, despite feminist activism, are still disadvantaged and these inequalities are more apparent when examining how women mother (Weeda-Zuidersma, 2007).

However, most of the mothers in my study indicated that they were supported in their parenting role to some extent by family and friends, felt that mothering was a rewarding experience and stated that mothering was easier as the children got older and/or with subsequent children, and most stated clearly that, for all the negatives associated with being a mother, they would choose the same path again. While some mothers had a generally negative reaction to mothering (Cassie, Julie, Kelly, Leonie and Stella) and some were ambivalent (Chloe, Debbie, Kendra, Naomi, Peyton and Yasmine), the majority were positive about being a

mother (Ella, Mandy, Megan, Melanie, Meredith, Paula, Renee, Stephanie, Susan and Vicky).

The Transition to Motherhood

In general, the mothers in my study highlighted many experiences after the birth of the first child that were not positive, as discussed above. This is consistent with other studies (Choi, Henshaw, Baker, & Tree, 2005; Cronin, 2003; Green & Kafetsios, 1997; Weaver & Ussher, 1997) that found that women expressed a lack of positive experiences in relation to mothering, despite the positive focus on the questions asked. For example, I asked “how do you feel about support as a parent?” whereas a negative focus might have asked participants to “tell me how you feel about lack of support as a parent”. Like Choi, Henshaw, Baker and Tree (2005), the results of my study show that expectations of mothering do not match the reality, as I discussed in Chapter 7, which leads to feelings of inadequacy. This is reflective of the cultural representation of womanhood that reinforces the good mother syndrome where women are capable of anything (Ussher, Hunter, & Brown, 2000).

Stating that women feel challenges in the transition to motherhood is not an unexpected finding; the transition period at any stage of one’s life would expect to be described as challenging. In Chapter 5, I discussed challenges to identity that some women in my study felt. What was interesting was that while the women in my study said that challenges to their identity were difficult with the birth of their first child, some of them stated that the feeling of loss of identity was reinforced with the birth of second and subsequent children. That is, the loss of identity one would expect with the birth of the first child did not initially become easier with later

births; it was not until the youngest child got older that loss of identity issues lessened for the women in my study. Indeed, those mothers with a more positive outlook on mothering (Ella, Mandy, Megan, Melanie, Meredith, Paula, Renee, Stephanie, Susan and Vicky) were not from the first time mothers focus group.

It seems more that women work harder for fear of being seen as a failure, perpetuating and reinforcing the myth, which is supported by Butler (1990) and Choi, Henshaw, Baker and Tree (2005). The systems of patriarchy are perpetuated by attributing any maternal dissatisfaction to the failure of the mother (Johnston & Swanson, 2003). Challenging the ideology might not be an option for many women; it is too late once the baby is born, because there are rare opportunities today to experience mothering vicariously, you cannot change your mind about being a mother, and new mothers become consumed by the task; agency may come later once adjusted to motherhood, which is why mothers say it is easier the second time around (Choi, Henshaw, Baker & Tree, 2005; Mauthner, 1999).

The Good Mother Syndrome and Playgroup

In Chapter 4, I discussed playgroup, and demonstrated that the women in my study attend playgroup for one of three reasons, which was supported by the literature: to develop a sense of belonging (Heneghan, Mercer, & DeLeone, 2004); to seek validation as a mother (Cronin, 2003; Tucci, Mitchell, & Goddard, 2005); and, to claim and exercise expertise (Blackford, 2004). Generally, the women in my study viewed playgroup as a positive experience as it served a number of purposes, such as socialisation of mother and child, provision of support networks, normalisation of the mothering experience and a source of advice from peers. While some of the women in my study viewed playgroup as a negative experience

for various reasons, they either chose to leave playgroup, find another playgroup, or re-evaluated their participation in playgroup. Overall, however, the general consensus was that playgroup was an invaluable service that supported women in their mothering role.

I have discussed how the good mother syndrome is strengthened or challenged by playgroup, and suggested that it is dependent on three factors: the group dynamics within the playgroup; stage of parenting; and, geographical factors. Despite the initial presumption that playgroup challenges the good mother syndrome, I contend that it strengthens it, because playgroup offers a model of service delivery that allows mothers to compare themselves, either favourably or unfavourably, with other mothers and how they mother on a regular basis. For example, in Chapter 4 I discussed how mothers use playgroup to observe others in their parenting style, to see how others handle similar situations, and to identify what they do not want to be as a parent. However, the results also show that playgroup, for the mothers who participated in the study, minimises negative feelings, by lowering mothers' expectations and normalising their reality, and through the provision of support at many levels.

It is important to note that while I spoke about the good mother syndrome, it was a concept that was not embraced by the participants in my study. They were able to identify what was a 'good' mother and what was a 'bad' mother, as I discussed in Chapter 4, but there is no evidence that they understood the good mother syndrome as an ideological concept. That implies that while mothers can grasp the differences in practical terms, while they are unable to understand the

abstract theory of the concept they will be unable to overcome the good mother syndrome.

Implications for Service Delivery

This study has implications for both policy and practice. It identifies areas where policy needs to be reviewed in order for additional funding to be provided to current early childhood services so they can continue with current services and expand these. The most effective changes, resulting in a greater likelihood of positive outcomes, come from early years interventions (McCain, Mustard, & Shanker, 2007; Shonkoff & Phillips, 2000). International research (Keating & Hertzman, 1999; Marmot, 1999; Shore, 1996; McCain & Mustard, 1999) shows that the quality of nurture in the early years has far-reaching effects on health and social development. In addition, Heckman (2006) proposes that investments for interventions in the early years can yield an eight-fold return, as opposed to those in school years, which yield a three-fold return. The High/Scope Perry Project, a United States federal government initiative to improve the academic success of 58 African-American children from low-income families, yielded a seven-fold return (Schweinhart, Barnes, & Weikart, 1993). It is therefore critical to evaluate the services offered in the early years in order to maximise the probability of positive outcomes for the future generation.

While it is acknowledged that government programs, such as 'Stronger Families, Stronger Communities', are committed to improving outcomes for families, the results of this study indicate that there is a community-based Australia-wide program – playgroup – that needs to be recognised as an important contributor to the well-being of families with young children, and that the playgroup movement

would benefit many more families with continued and increased governmental support and funding. The Australian federal government continues to provide playgroups Australia-wide with financial support, as it has since 1975 (see www.facs.gov.au/internet/facsinternet.nsf/family/parenting-playgroups.htm for further details), and a key outcome of the Australian government's 2020 Summit was recognition of the importance of programs that strengthen families (for further details see www.australia2020.gov.au).

Strengths and Limitations

A limitation of this study is that it examined motherhood and playgroup in the Perth metropolitan area only; it would be interesting to hear the experiences of mothers in other states or other areas of Western Australia. A second limitation is the homogeneity of the sample. Because of the way that the sample was constructed, through self-selection, it was unlikely that a heterogeneous sample would result. All of the women in this study attended a playgroup that meets on a week day, and therefore, none of them worked traditional full-time hours (Monday to Friday, 9 to 5). Further, it can be argued that playgroup is a middle-class construction, so the women that were interviewed for this study were white, middle-class mothers of Anglo-Celtic descent, all of whom were involved in a heterosexual relationship. While it is acknowledged that Playgroup WA (Inc) values diversity, and there are playgroups for culturally and linguistically diverse families, as well as for families with additional needs, none of these people responded to the request for an interview. It is a possibility that culturally and linguistically diverse families were reluctant to participate in the study because of my inclusion criteria that participants needed to understand and speak English. Potential participants were

advised that the interviews would take approximately 40 minutes, so while parents of children with additional needs might be interested in the study, the demands on their time are often increased by caregiving, and this may have been a deterrent to participation for such families. Homogeneity of the sample, therefore, may be attributed to the effects of my selection criteria.

I stated in Chapter 3 that I interviewed 11 women in one-on-one interviews and ten women in focus groups. Whilst qualitative research is not concerned with the number of participants, but with the experiences that participants share (Lincoln & Guba, 1985; Strauss & Corbin, 1998), the results and conclusions apply to the sample only. In addition, because each participant constructs her own experience, some experiences might not be shared by the sample. Inclusion of atypical cases adds to the rigour of the study, as discussed in Chapter 3.

Future Research

Future studies could include not only mothers in other states, but also to examine if the issues are also prevalent in rural areas of Australia. It could be suggested, for example, that the concerns of geographical isolation and lack of support are not so dominant in rural areas with smaller populations. As mentioned in Chapter 2, future research could examine the good mother syndrome and playgroup in relation to families that represent cultural or structural diversity, such as migrant groups, same-sex parent families or single parent families.

If parents perceive themselves as benefiting from programs such as playgroup, then, in order to achieve positive outcomes for families, it would be beneficial for government policy to emanate from the parents' perspective. Services need to become more responsive to the community in order to meet their

current needs. Part of the problem seems to be that new parents are unaware of the early intervention programs available to them (Carbone, Fraser, Ramburuth, & Nelms, 2004; Tayler, Tennent, Farrell, & Gahan, 2002). A future study could investigate what services are known to new mothers. Additionally, for those who choose not to utilise any of the services available, a study could investigate how and why parents made that choice.

Conclusion

In conclusion, despite the changes one would expect of a generation, the results of this study demonstrate that for this group of Anglo-Celtic, middle-class Perth women, the notion of a 'good mother' has changed very little since Australian research was conducted in the 1980s (Wearing, 1984). The historical, social and cultural determinants of what constitutes a good mother remain virtually unchallenged and unchanged. However, generally speaking, the ideology of the good mother syndrome is strengthened by playgroups, which remains a validating experience for women who come together to support each other via a vehicle that encompasses their children.

References

- Abrams, D., & Hogg, M. (1990). *Social identity theory: Constructive and critical advances* London: Harvester Wheatsheaf.
- Aiston, S. (2004). A good job for a girl? The career biographies of women graduates of the University of Liverpool post-1945. *20 Century British History*, 15 (4), 361 – 387.
- Albury, R. (1999). *The politics of reproduction: Beyond the slogans*. Sydney: Allen and Unwin.
- Allan, J., & Schultz, C. (1987). Parent education: Development and discrepancies. *Journal of Australian Child and Family Welfare*, 12, 14 – 16.
- Allen, B. (2005). Social constructionism. In S. May & D. Mumby (Eds.) *Engaging organizational communication theory & research: Multiple perspectives* (pp. 35 – 54). Thousand Oaks: Sage Publications.
- Allen, J. (1982). Octavius Beale reconsidered: Infanticide, baby farming and abortion in NSW, 1880 – 1939. In Sydney Labour History Group (Eds.) *What rough beast? The state and social order in Australian history* (pp. 111 – 129). Sydney: George Allen & Unwin.
- Aponte, H. (2003). The therapists' use of self in family therapy. *Journal of Family Psychotherapy*, 14, 90 – 92.
- Aries, P. (1962). *Centuries of childhood: A social history of family life*. New York: Alfred A Knopf.
- Arendell, T. (2000). Conceiving and investigating motherhood: The decade's scholarship. *Journal of Marriage and the Family*, 62, 1192 – 1208.

- Arnup, K. (1994). *Education for motherhood: Advice for mothers in twentieth-century Canada*. Toronto: University of Toronto Press.
- Atkins, M. (1986). The Welcome Baby Program: A community-based volunteer prevention model of caring, sharing, and support for new parents. *Infant Mental Health Journal*, 7, 156 – 167.
- Australian Bureau of Statistics (2005). *Australian social trends data cube*. Cat no 4102.0. Available from [www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/906C5AFC55D0C01BCA2571B0001D784B/\\$File/41020_work%20-%202006.xls](http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/906C5AFC55D0C01BCA2571B0001D784B/$File/41020_work%20-%202006.xls)
- Australian Bureau of Statistics (2005a). *Marriages, Australia, 2005*. Cat no 3306.0.55.001. Available from www.abs.gov.au/AUSSTATS/abs@.nsf/ProductsbyTopic/CF55893EF956832ACA257110007F4DCA?OpenDocument
- Australian Capital Territory Government (2006). *Review of the Children and Young People Act 1999*. Available from www.dhcs.act.gov.au
- Bailey, L. (1999). Refracted selves? A study of changes in self-identity in the transition to motherhood. *Sociology*, 33, 335 – 352.
- Bailey, C., & Pain, R. (2001). Geographies of infant feeding and access to primary health-care. *Health and Social Care in the Community*, 9 (5), 309 – 317.
- Bamberg, M. (1997). Positioning between structure and performance. *Journal of Narrative and Life History*, 71, 335 – 342.
- Banyard, V., & Graham-Bermann, S. (1993). Can women cope? A gender analysis of theories of coping with stress. *Psychology of Women Quarterly*, 17, 308 – 318,

- Barlow, J., & Stewart-Brown, S. (2001). Understanding parenting programmes: Parent's views. *Primary Health Care Research and Development*, 2, 117 – 130.
- Baxter, J., Hewitt, B., & Haynes, M. (2008). Life course transitions and housework: Marriage, parenthood and time on housework. *Journal of Marriage and Family*, 70 (2), 259 – 272.
- Baxter, J., Hewitt, B., & Western, M. (2005). Post-familial families and the domestic division of labour. *Journal of Comparative Family Studies*, 36 (4), 583 – 603.
- Belle, D., & Doucet, J. (2003). Poverty, inequity, and discrimination as sources of depression among US women. *Psychology of Women Quarterly*, 27 101 – 113.
- Belsky, J., Youngblade, L., Rovine, M., & Valling, B. (1991). Patterns of marital change and parent-child interaction. *Journal of Marriage and the Family*, 52, 885 – 903.
- Berg, B. (2000). *Qualitative research methods for the social sciences*. (4th ed.). Needham Heights: Allyn & Bacon.
- Berger, J., Cohen, B., & Zelditch, M. (1972). Status characteristics and social interaction. *American Sociological Review*, 37 (3), 241 – 255.
- Berger, J., Rosenholtz, S., & Zelditch, M. (1980). Status organizing processes. *Annual Review of Sociology*, 6, 479 – 508.
- Benin, M., & Keith, V. (1995). The social support of employed African, American and Anglo mothers. *Journal of Family Issues*, 16, 275 – 297.

- Billson, J. (1991). The progressive verification method: Towards a feminist methodology for studying women cross-culturally. *Women's Studies International Forum*, 14 (3), 201 – 215.
- Blackford, H. (2004). Playground panopticism: Ring-around-the-children, a pocketful of women. *Childhood*, 11 (2), 227 – 249.
- Bloomfield, L., Kendall, S., Applin, L., Attarzadeh, V., Dearnley, K., Edwards, L., Hinshelwood, L., Lloyd, P., & Newcombe, T. (2005). A qualitative study exploring the experiences and views of mothers, health visitors and family support centre workers on the challenges and difficulties of parenting. *Health and Social Care in the Community*, 13 (1), 46 – 55.
- Bornstein, M., & Lamb, M. (1992). *Development in infancy: An introduction*. New York: McGraw-Hill.
- Bost, K., Cox, M., Burchinal, M., & Payne, C. (2002). Structural and supporting changes in couples' family and friendship networks across the transition to parenthood. *Journal of Marriage and the Family*, 64 (2), 517 – 531.
- Bottomley, G. (1975). Community and network in a city. In C. Price (Ed), *Greeks in Australia*, Canberra: Australian University Press, 112 – 142.
- Bouma, G. (2000). *The research process*. Melbourne: Oxford University Press.
- Boyd, R., Diamond, G., & Bourjolly, J. (2006). Developing a family-based depression prevention program in urban community mental health clinics: A qualitative investigation. *Family Process*, 45 (2), 187 – 203.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2), 77 – 101.

- Brody, G., Flor, D., & Gibson, N. (1999). Linking maternal efficacy beliefs, developmental goals, parenting practices and child competence in rural single-parent African American families. *Child Development*, 70, 1197 – 1208.
- Brown, S., & Booth, A. (2002). Stress at home, peace at work: A test of the time bind hypothesis. *Social Science Quarterly*, 83 (4), 905 – 920.
- Brown, L., & Gilligan, C. (1992). *Meeting at the crossroads: Women's psychology and girls' development*. Cambridge: Harvard University Press.
- Brown, S., Small, R., & Lumley, J. (1994). Troubled thoughts on being a 'good' mother. In S. Brown, R. Small, J. Lumley, & J. Astbury (Eds.). *Missing voices: The experience of motherhood*. (pp. 139 – 160). Melbourne: Oxford University Press.
- Brown, S., Small, R., Lumley, J., & Astbury, J. (1994). *Missing voices: The experience of motherhood*. Melbourne: Oxford University Press.
- Buchanan, J., & Thornthwaite, L. (2001). *Paid work and parenting: Charting a new course for Australian families*. Chifley Research Foundation, available from www.chifley.org.au
- Burgess-Limerick, T., & Burgess-Limerick, R. (1998). Conversational interviews and multiple-case research in psychology. *Australian Journal of Psychology*, 50 (2), 63 – 70.
- Burke, P. (1991). Identity processes and social stress. *American Sociological Review*, 56, 836 – 849.
- Burke, P. (2004). Identities and social structure: The 2003 Cooley-Mead Award address. *Social Psychology Quarterly*, 1, 5 – 15.

- Burke, P., & Stets, J. (1999). Trust and commitment through self-verification. *Social Psychology Quarterly*, 62, 347 – 360.
- Burke, P., & Tully, J. (1977). The measurement of role identity. *Social Forces*, 55, 881 – 898.
- Burr, V. (2003). *Social constructionism*. London: Routledge.
- Burroughs, S., & Eby, L. (1998). Psychological sense of community at work: A measurement system and explanatory framework. *Journal of Community Psychology*, 26, 509 – 532.
- Butler, J. (1990). *Gender trouble: Feminism and the subversion of identity*. London: Routledge.
- Buzzanell, P., Meisenbach, R., Remke, R., Liu, M., Bowers, V., & Conn, C. (2005). The good working mother: Managerial women's sensemaking and feelings about work-family issues. *Communication Studies*, 56 (3), 261 – 285.
- Calvert, G. (2000). Valuing children, young people and families. *Family Matters*, 56, 28 – 33.
- Campbell, K., & Lee, B. (1992). Sources of personal neighbor networks: Social integration, need, or time? *Social Forces*, 70, 1077 – 1100.
- Campbell, R. (1994). The virtues of feminist empiricism. *Hypatia*, 9 (1), 90 – 91.
- Canavan, J., Dolan, P., & Pinkerton, J. (2000). *Family support: Direction from diversity*. London: Jessica Kingsley Publishers.
- Cannold, L. (1998). *The abortion myth: Feminism, morality and the hard choices women make*. St Leonard's: Allen and Unwin.
- Cannold, L. (2005). *What, no baby? Why women are losing the freedom to mother, and how they can get it back*. Fremantle: Curtin University Press.

- Carbone, S., Fraser, A., Ramburuth, R., & Nelms, L. (2004). *Breaking cycles, building futures: Promoting inclusion of vulnerable families in antenatal and universal early childhood services*. Collingwood: Gill Miller Press.
- Carnegie, G., & Walker, S. (2005). Household accounting in Australia: Prescription and practice from the 1820s to the 1960s. *Accounting, Auditing and Accountability Journal*, 20 (1), 41 – 73.
- Carolan, M. (2004). Maternal and child health nurses: A vital link to the community for primiparae over the age of 35. *Contemporary Nurse*, 18 (1-2), 133 – 142.
- Cassel, J. (1976). The contribution of the social environment to host resistance. *American Journal of Epidemiology*, 104 (2), 107 – 123.
- Cast, A. (1998). *Parent identities and behavior: An identity theory approach*. Unpublished doctoral dissertation, Washington State University, Washington.
- Cast, A. (2004). Well-being and the transition to parenthood: An identity theory approach. *Sociological Perspectives*, 47 (1), 55 – 78.
- Cast, A., & Burke, P. (2002). A theory of self-esteem. *Social Forces*, 60, 1041 – 1068.
- Ceballo, R., & McLoyd, V. (2002). Social support and parenting in poor, dangerous neighborhoods. *Child Development*, 73 (4), 1310 – 1321.
- Charles, S., & Shivas, T. (2002). Mothers in the media: Blamed and celebrated – an examination of drug abuse and multiple births. *Pediatric Nursing*, 28 (2), 142 – 145.
- Chaudron, L., Kitzman, H., Peifer, K., Morrow, S., Perez, L., & Newman, M. (2005). Self-recognition of and provider response to maternal depressive symptoms in low-income Hispanic women. *Journal of Women's Health*, 14, 331 – 338.

- Chavis, D., & Wandersman, A. (1990). Sense of community in the urban environment: A catalyst for participation and community development. *American Journal of Community Psychology*, 18 (1), 55 – 81.
- Chodorow, N. (1978). *The reproduction of mothering: Psychoanalysis and the sociology of gender*. Berkeley: University of California Press.
- Chodorow, N. (1989). *Feminism and psychoanalytic theory*. New Haven: Yale University Press.
- Choi, P., & Bird, S. (2003). Feminism and marriage: To be or not to be Mrs B? *Feminism and Psychology*, 13, 448 – 453.
- Choi, P., Henshaw, C., Baker, S., & Tree, J. (2005). Supermum, superwife, supereverything: Performing femininity in the transition to motherhood. *Journal of Reproductive and Infant Psychology*, 23 (2), 167 – 180.
- Cicchetti, D., & Toth, S. (1995). A developmental psychopathological perspective on child abuse and neglect. *Journal of the American Academy of Child and Adolescent Psychiatry*, 34, 541 – 565.
- Cohen, S. (2004). Social relationships and health. *American Psychologist*, 59 (8), 676 – 684.
- Cohen, S., & Willis, T. (1985). Stress, social support and the buffering hypothesis. *Psychological Bulletin*, 98 (2), 310 – 357.
- Collett, J. (2005). What kind of mother am I? Impression management and the social construction of motherhood. *Symbolic Interaction*, 28 (3), 327 – 347.
- Coltrane, S. (1996). *Family man*. New York: Oxford University Press.
- Connell, R. (2005). A really good husband: Work/life balance, gender equity and social change. *Australian Journal of Social Issues*, 40 (3), 369 – 383.

- Conway, E. (1999). Teenage pregnancy: A spiralling problem. *The World of Irish Nursing*, 9, 19 – 20.
- Cosgrove, L. (2003). Feminism, postmodernism, and psychological research. *Hypatia*, 18, 85 – 247.
- Cosgrove, L., & McHugh, M. (2000). Speaking for ourselves: Feminist methods and community psychology. *American Journal of Community Psychology*, 28, 816 – 838.
- Cronin, C. (2003). First-time mothers – identifying their needs, perceptions and experiences. *Journal of Clinical Nursing*, 12 (2), 260 – 267.
- Crotty, M. (1998). *The foundations of social research. Meaning and perspective in the research process*. St. Leonards: Allen and Unwin.
- Crouch, M., & Manderson, L. (1993). *New motherhood: Cultural and personal transitions in the 1980s*. Amsterdam: Gordon and Breach Science Publishers.
- Cunningham, C., & Boyle, M. (2002). Preschoolers at risk for attention-deficit hyperactivity disorder and oppositional defiant disorder: Family, parenting and behavioural correlates. *Journal of Abnormal Child Psychology*, 30, 555 – 569.
- D'Abbs, P. (1982). *Social support networks: A critical review of models and findings*. Melbourne: Institute of Family Studies.
- Dadich, A. (2008). Evaluating playgroups: An examination of issues and options. *Australian Community Psychologist*, 20 (1), 95 – 104.
- Dally, A. (1982). *Inventing motherhood: The consequences of an ideal*. London: Burnett.

- Dalton, J., Elias, M., & Wandersman, A. (2001). *Community psychology: Linking individuals and communities*. Stamford: Wadsworth.
- Damast, A., Tamis-LaMonda, C., & Bornstein, M. (1996). Mother-child play: Sequential interaction and the relation between maternal beliefs and behaviors. *Child Development*, 67, 1752 – 1766.
- Deacey, C. (2005). *Motherhood statements: Mothers and their adolescent daughters*. Unpublished Masters dissertation, Australian Catholic University, Victoria.
- de Hoogd, D., Mitchell, J., & Tucci, J. (2003). *Every child is important. What parents have told us they want in parenting education and support: How to improve primary child abuse prevention initiatives*. Ninth Australasian Conference on Child Abuse and Neglect, Sydney. Available from www.community.nsw.gov.au/documents
- Delmore-Ko, P., Pancer, M., Hunsberger, B., & Pratt, M. (2000). Becoming a parent: The relation between prenatal expectations and postnatal experience. *Journal of Family Psychology*, 14 (4), 625 – 640.
- De Luccie, M. (1995). Mothers as gatekeepers: A model of maternal mediators of father involvement. *Journal of Genetic Psychology*, 156, 115 – 131.
- Denzin, N., & Lincoln, Y. (2003). *Strategies of qualitative inquiry*. Thousand Oaks: Sage.
- DeVault, M. (1996). Talking back to sociology: Distinctive contributions of feminist methodology. *American Review of Sociology*, 22, 29 – 50.
- DeVault, M. (1999). *Liberating method: Feminism and social research*. Philadelphia: University Press.

- de Vaus, D. (1997). Family values in the nineties: Gender gap or generation gap? *Family Matters*, 48, 5 – 10.
- de Vaus, D., & Gray, M. (2003). Family transitions among Australia's children. *Family Matters*, 65, 10 – 17.
- de Vaus, J. (1992). *Mothers growing up: Understanding the heartaches of motherhood*. Sydney: Allen & Unwin.
- Dever, M., & Saujeres, L. (2004). 'I forgot to have children!' Untangling links between feminisms, careers and voluntary childlessness. *Journal of the Association for Research on Mothering*, 6, 112 – 126.
- Dienhart, A., & Daly, K. (1997). Men and women co-creating father involvement in a non-generative culture. In A. Hawkins & D. Dollahite (Eds.), *Generative fathering: Beyond deficit perspectives*. (pp. 202 – 225). Thousand Oaks: Sage.
- Dingo, R. (2004). Securing the nation: Neoliberalism's US family values in a transnational gendered economy. *Journal of Women's History*, 16 (3), 173 – 187.
- Dinnerstein, D. (1976). *The mermaid and the minotaur: Sexual arrangements and human malaise*. New York: Harper and Row.
- Dixson, M. (1999). *The real Matilda: Women and identity in Australia: 1788 to the present*. Sydney: University of New South Wales Press.
- Donelson, F. (1999). *Women's experiences: A psychological perspective*. California: Mayfield Publishing Company.
- Donzelot, J. (1979). *The policing of families*. New York: Pantheon Books.

- Doorewaard, H., Hendrickx, J., & Verschuren, P. (2004). Work orientations of female returners. *Work, Employment & Society*, 18 (1), 7 – 27.
- Douglas, S., & Michaels, M. (2004). *The mommy myth: The idealization of motherhood and how it has undermined women*. New York: Simon and Schuster.
- Duncan, J., Bowden, C., & Smith, A. (2006). A gossip or a good yack? Reconceptualizing parent support in New Zealand early childhood centre based programmes. *International Journal of Early Years Education*, 14 (1), 1 – 13.
- Dunkel-Schetter, C., Sagrestano, L., Feldman, P., & Killingsworth, C. (1996). Social support and pregnancy: A comprehensive review focusing on ethnicity and culture. In G. Pierce, B. Sarason, & I. Sarason (Eds.). *Handbook of social support and the family*. (pp. 375 – 412). New York: Plenum Press.
- Eagly, A. (1995). The science and politics of comparing men and women. *American Psychologist*, 50 (3), 145 – 158.
- Edley, N. (2001). Analysing masculinity: Interpretive repertoires, ideological dilemmas and subject positions. In M. Wetherell, S. Taylor, & S. Yates (Eds.), *Discourse as data: A guide for analysis*. (pp. 189 – 228). London: Sage Publications.
- Ehrenreich, B., & English, D. (1989). *For her own good: 150 years of the experts' advice to women*. New York: Anchor Books.
- Ehrensaft, M., Wasserman, G., Verdelli, L., Greenwald, S., Miller, L., & Davies, M. (2003). Maternal antisocial behaviour, parenting practices, and behavioural

- problems in boys at risk for antisocial behaviour. *Journal of Child and Family Studies*, 12, 27 – 40.
- Ellemers, N., Spears, R., & Doosje, B. (2002). Self and social identity. *Annual Review of Psychology*, 53, 161 – 186.
- Ellis, C., & Berger, L. (2002). Their story/my story/our story: Including the researcher's experience in interview research. In J. Gubrium & H. Holstein (Eds.), *Handbook of interview research: Context and method* (pp. 849 – 874). Thousand Oaks: Sage.
- Erdwins, C., Buffardi, L., Casper, W., & O'Brien, A. (2001). The relationship of women's role strain to social support, role satisfaction, and self-efficacy. *Family Relations*, 50 (3), 230 – 238.
- Etaugh, C., & Folger, D. (1998). Perceptions of parents whose work and parenting behaviors deviate from role expectations. *Sex Roles*, 39, 215 – 223.
- Everingham, C., Heading, G., & Connor, L. (2006). Couples' experiences of postnatal depression: A framing analysis of cultural identity, gender and communication. *Social Science and Medicine*, 62 (7), 1745 – 1751.
- Everitt, A., & Hardiker, P. (1996). *Evaluating for good practice*. London: Macmillan.
- Eyer, D. (1996). *Mother guilt: How our culture blames mothers for what's wrong with society*. New York: Random House.
- Fagan, C. (2001). Time, money and the gender order: Work orientations and working time preferences in Britain. *Gender, Work and Organization*, 8 (3), 239 – 266.
- Firestone, S. (1970). *The dialectic of sex*. London: Paladin.

- Folkes-Skinner, J., & Meredith, E. (1997). Teenage mothers and their experiences of services. *Health Visitor*, 70 (4), 139 – 140.
- Fonow, M., & Cook, J. (1991). The future: A look at the second wave of feminist epistemology and methodology. In M. Fonow & J. Cook (Eds.), *Beyond methodology: Feminist scholarship as lived research*. (pp. 1 – 15).
Bloomington: Indiana University Press.
- Forgatch, M., & DeGarmo, D. (1997). Confident contributions to parenting and child outcomes. *Social Development*, 6, 237 – 253.
- Friedan, B. (1963). *The feminine mystique*. New York: W.W. Norton.
- Frydman, G. (1987). *Mature-age mothers*. Ringwood: Penguin.
- Garbarino, J., & Sherman, D. (1980). High-risk neighborhoods and high-risk families: The human ecology of child maltreatment. *Child Development*, 51, 188 – 198.
- Geddes, J. (2005). Playgroup smarts. *Parenting*, 19 (3), 59.
- Gergen, K. (1985). The social constructionist movement in modern psychology. *American Psychologist*, 40, 266 – 275.
- Gergen, K. (1999). *An imitation to social constructionism*. London: Sage.
- Gilding, M. (2001). Changing families in Australia, 1901 – 2001. *Family Matters*, 60, 6 – 11.
- Gillespie, R. (2000). Disbelief, disregard and deviance as discourses of voluntary childlessness. *Women's Studies International Forum*, 23, 223 – 234.
- Gillespie, R. (2001). Contextualising voluntary childlessness within a postmodern model of reproduction: Implications for health and social needs. *Critical Social Policy*, 21, 139 – 159.

- Gilligan, C. (1993). *In a different voice: Psychological theory and women's development*. Cambridge: Harvard University Press.
- Giorgi, A., & Giorgi, B. (2003). Phenomenology. In J. Smith (Ed.), *Qualitative psychology: A practical guide to research methods*. (pp. 25 – 50). London: Sage Publications.
- Gjerdingen, O., & Chaloner, K. (1994). Mothers' experience with household roles and social support during the first postpartum year. *Women and Health*, 21, 57 – 74.
- Golding, K. (2000). Parent management training as an intervention to promote adequate parenting. *Clinical Child Psychology and Psychiatry*, 5, 357 – 371.
- Gomby, D. (2005). Home visitation in 2005: Outcomes for children and parents. *Invest in Kids Working Paper 7*. Available from www.ced.org/docs/report/report_ivk_gomby_2005.pdf
- Gomm, R. (2004). *Social research methodology: A critical introduction*. New York: Palgrave Macmillan.
- Grbich, C. (1999). *Qualitative research in health: An introduction*. St Leonards: Allen & Unwin.
- Green, J., & Kafetsios, K. (1997). Positive experiences of early motherhood: Predictive variables from a longitudinal study. *Journal of Reproductive and Infant Psychology*, 15, 141 – 157.
- Green, B., & Rodgers, A. (2001). Determinants of social support among low-income mothers: A longitudinal analysis. *American Journal of Community Psychology*, 29 (3), 419 – 441.

- Green, J., Willis, K., Hughes, E., Small, R., Welch, N., Gibbs, L., & Daly, J. (2007). Generating best evidence from qualitative research. *Australian and New Zealand Journal of Public Health*, 31 (6), 545 – 550.
- Greenstein, T. (1996). Husbands' participation in domestic labor: Interactive effects of wives' and husbands' gender ideologies. *Journal of Marriage and the Family*, 58, 585 – 595.
- Greenwald, L., Siegel, M., & Greenwald, R. (2006). Kindering Center: A comprehensive early intervention community-based program model. *Infants and Young Children*, 19 (3), 190 – 202.
- Gross, D., Conrad, B., Fogg, L., & Wothke, W. (1994). A longitudinal model of maternal self-efficacy, depression, and difficult temperament during toddlerhood. *Research in Nursing and Health*, 17, 207 – 215.
- Guendouzi, J. (2005). 'I feel quite organised this morning': How mothering is achieved through talk. *Sexualities, Evolution and Gender*, 7, 17 – 35.
- Haas, L. (1992). *Equal parenthood and social policy*. Albany: State University of New York Press.
- Hakim, C. (2000). *Work-lifestyle choices in the 21st century. Preference theory*. Oxford: Oxford University Press.
- Hakim, C. (2003). *Models of the family in modern societies. Ideals and realities*. Aldershot: Ashgate Press.
- Halpern, E., Lamb-Parker, F., Acra, C., & Jaspen, D. (2006). Social-emotional functioning and academic risk: Cluster analysis of social-emotional measures differentiates academic functioning in Head Start children. In F. Lamb-Parker and J. Hagen (Eds.), *Summary of proceedings for Head*

Start's Eighth National Research Conference (pp. 12 – 13). Washington, DC: US Department of Health and Human Services/Administration on Children and Families (DHHS/ACF). Available from www.acf.hhs.gov/programs/opre/hsrc/proceedings/posters/curriculum-develop.html

- Halpren, D. (1994). Stereotypes, science, censorship, and the study of sex differences. *Feminism and Psychology*, 4 (4), 523 – 530.
- Hannam, J. (1997). Women, history and protest. In V. Robinson & D. Richardson (Eds.), *Introducing women's studies: Feminist theory and practice*. New York: New York University Press.
- Haour-Knipe, M. (2001). *Moving families: Expatriation, stress and coping*. London: Routledge.
- Harding, S. (1987). Introduction: Is there a feminist method? In S. Harding (Ed.), *Feminism and methodology: Social science issues*. (pp. 1 – 14). Bloomington: Indiana University Press.
- Harding, S. (1991). *Whose science? Whose knowledge? Thinking from women's lives*. Buckingham: Open University Press.
- Harman, B. (1993). *Out of mind, out of sight: Women incarcerated as insane in Western Australia, 1858 – 1908*. Unpublished Masters dissertation, University of Western Australia.
- Harris, M. (1995). *Down from the pedestal: Moving beyond idealized images of womanhood*. New York: Doubleday.

- Harrison, R., Boyle, S., & Farley, O. (1999). Evaluating the outcomes of family-based intervention for troubled children: A pretest-posttest study. *Research on Social Work Practice*, 9, 640 – 655.
- Haslanger, S. (1995). Ontology and social construction. *Philosophical Topics*, 23 (2), 95 – 125.
- Hattery, A. (2001). *Women, work and family: Balancing and weaving*. London: Sage Publications.
- Hawkins, A., & Dollahite, D. (1997). Beyond the role-inadequacy perspective. In A. Hawkins & D. Dollahite (Eds.), *Generative fathering: Beyond deficit perspectives*. (pp. 3 – 16). Thousand Oaks: Sage.
- Hays, S. (1996). *The cultural contradictions of motherhood*. New Haven: Yale University Press.
- Heckman, J. (2006). *Investing in disadvantaged young children in an economically efficient policy*. Paper presented at the Committee for Economic Development, Pew Charitable Trusts, New York. Available from www.ced.org
- Hekman, S. (1999). *The future of differences: Truth and method in feminist theory*. Massachusetts: Blackwell.
- Henderson, A., & Lucas, J. (1981). *Pre-school playgroups: A handbook*. London: George Allen & Unwin.
- Heneghan, A., Mercer, M., & DeLeone, N. (2004). Will mothers discuss parenting stress and depressive symptoms with their child's pediatrician? *Pediatrics*, 3 (1), 460 – 467.

- Henwood, K., & Pidgeon, N. (1995). Remaking the links: Qualitative research and feminist standpoint theory. *Feminism and Psychology*, 5 (1), 7 – 30.
- Hercus, C. (1999). *Stepping out of line: A study of involvement in feminist collective action*. Unpublished PhD dissertation James Cook University of North Queensland, Townsville.
- Hertz, R. (1996). Introduction: Ethics, reflexivity and voice. *Qualitative Sociology*, 19 (1), 3 – 9.
- Higgins, H. (1907). Ex parte HV McKay (Harvester case), (1907) 2 CAR 1. *Law Internet Resources*. Parliament of Australia, Parliamentary Library. Available from www.aph.gov.au
- Higman, B. (2002). *Domestic service in Australia*. Melbourne: Melbourne University Press.
- Himmelweit, S., & Sigala, M. (2004). Choice and the relationship between identities and behaviour for mothers with pre-school children: Some implications from a UK study. *Journal of Social Policy*, 33 (3), 455 – 478.
- Hird, M., & Abshoff, K. (2001). Women without children: A contradiction in terms? *Journal of Comparative Family Studies*, 31, 347 – 366.
- Hitlin, S. (2003). Values as the core of personal identity: Drawing the links between two theories of self. *Social Psychology Quarterly*, 66 (2), 118 – 137.
- Hochschild, A. (1997). *The time bind. When work becomes home and home becomes work*. New York: Henry Holt.
- Hock, E., & DeMeis, D. (1990). Depression in mothers of infants: The role of maternal employment. *Developmental Psychology*, 26 (2), 285 – 291.

- Hoffman, L. (1990). Constructing realities: An art of lenses. *Family Process*, 29, 1 – 12.
- Hogg, M., & Williams, K. (2000). From I to we: Social identity and the collective self. *Group Dynamics: Theory, Research and Practice*, 4 (1), 81 – 97.
- Hohaus, L., Feeney, J., & Noller, P. (1998, November). *The transition to parenthood: A study in progress*. Paper presented at the 6th Australian Institute of Family Studies Conference, Melbourne.
- Holstein, J., & Gubrium, J. (2000). *The self we live by*. New York: Oxford University Press.
- Hruby, G. (2001). Sociological, postmodern, and new realism perspectives in social constructionism: Implications for literacy research. *Reading Research Quarterly*, 36 (1), 48 – 62.
- Hughes, J., & Stone, W. (2003). *Family change and community life: Exploring the links*. Research paper 32, available from www.aifs.org.au
- Hugo, G. (2001). A century of population change in Australia. In Australian Bureau of Statistics, *Year book Australia, 2001*. Canberra: ABS.
- Hur, M. (2006). Empowerment in terms of theoretical perspectives: Exploring a typology of the processes and components across disciplines. *Journal of Community Psychology*, 34, 523 – 540.
- Hyde, J. (1994). Should psychologists study gender differences? Yes, with some guidelines. *Feminism and Psychology*, 4 (4), 507 – 512.
- Hyun, O., Lee, W., Yoo, A., & Cho, B. (2002). Social support for two generations of new mothers in selected populations in Korea, Hong Kong, and the United States. *Journal of Comparative Family Studies*, 33 (4), 515 – 527.

- Jack, G. (2000). Ecological influences on parenting and child development. *British Journal of Social Work*, 30 (6), 703 – 720.
- Jackiewicz, S. (1998). *The lived experience of a group of mothers, geographically isolated from their families, in establishing their social support networks*. Unpublished Masters dissertation, Edith Cowan University, Perth, Western Australia.
- Jackson, D. (2006). Playgroups as protective environments for refugee children at risk of trauma. *Australian Journal of Early Childhood*, 31 (2), 1 – 5.
- Jackson, S. (1993) Women, marriage and family relationships. In V. Robinson & D. Richardson (Eds.). *Introducing women's studies: Feminist theory and practice*. New York: New York University Press.
- Jagger, A (2000). Feminist ethics. In H. LaFollette (Ed.), *Blackwell guide to ethical theory*. (pp. 348 – 374). Oxford: Blackwell.
- Jayakody, R., Chatters, L., & Taylor, R. (1993). Family support to single and married African American mothers: The provision of financial, emotional, and child care assistance. *Journal of Marriage and the Family*, 55, 261 – 275.
- Johnston, D., & Swanson, D. (2003). Invisible mothers: A content analysis of motherhood ideologies and myths in magazines. *Sex Roles*, 49, 21 – 33.
- Johnston, D., & Swanson, D. (2004). Moms hating moms: The Internalization of mother war rhetoric. *Sex Roles*, 51, 497 – 509.
- Johnston, D., & Swanson, D. (2006). Constructing the “Good Mother”: The experience of mothering ideologies by work status. *Sex Roles*, 54, 509 – 519.

- Jovchelovitch, S., & Bauer, M. (2000). Narrative interviewing. In M. Bauer & G. Gaskell (Eds), *Qualitative research with text, image and sound*. (pp. 57 – 74). London: Sage.
- Kaplan, E. (1992). *Motherhood and representation: The mother in popular culture and melodrama*. London: Routledge.
- Kazura, K. (2000). Fathers' qualitative and quantitative involvement: An investigation of attachment, play, and social interactions. *Journal of Men's Studies*, 9 (1), 41 – 54.
- Keating, D., & Hertzman, C. (1999). *Developmental health and the wealth of nations*. New York: Guilford Press.
- Kim, D., Sarason, B., & Sarason, I. (2006). Implicit social cognition and culture: Explicit and implicit psychological acculturation, and distress of Korean-American young adults. *Journal of Social and Clinical Psychology*, 25 (1), 1 – 31.
- Kingston, B. (1977). *The world moves slowly: A documentary history of Australian women*. NSW: Cassell.
- Kirsch, G. (1999). *Ethical dilemmas in feminist research: The politics of location*. Albany: State University of New York Press.
- Kitzinger, S. (1978). *Women as mothers: The universal experience of motherhood*. Glasgow: Fontana.
- Kitzinger, S. (1992). *Ourselves as mothers*. London: Doubleday.
- Kluwer, E., Heesink, J., & van de Vliert, E. (2002). The division of labor across the transition to parenthood: A justice perspective. *Journal of Marriage and the Family*, 64 (4), 930 – 943.

- Kroska, A. (2001). Do we have consensus? Examining the relationship between gender ideology and role meanings. *Social Psychology Quarterly*, 64 (1), 18 – 41.
- Kroska, A. (2002). Does gender ideology matter? Examining the relationship between gender ideology and self- and partner-meetings. *Social Psychology Quarterly*, 65 (3), 248 – 266.
- Kroska, A. (2003). Investigating gender differences in the meaning of household chores and child care. *Journal of Marriage and the Family*, 65 (2), 456 – 473.
- Kroska, A. (2004). Divisions of domestic work : Revising and expanding the theoretical explanations. *Journal of Family Issues*, 25 (7), 900 – 932.
- Krueger, R., & Casey, M. (2000). *Focus groups: A practical guide for applied research*. California: Sage Publications.
- Kwok, S., & Wong, D. (2000). Mental health of parents with young children in Hong Kong: The roles of parenting stress and parenting self-efficacy. *Child and Family Social Work*, 5, 57 – 65.
- Laflamme, D., Pomerleau, A., & Malcuit, G. (2002). A comparison of fathers' and mothers' involvement in childcare and stimulation behaviors during free-play with their infants at 9 and 15 months. *Sex Roles*, 47 (11), 507 – 518.
- Lamb, M., Pleck, J., & Levine, J. (1987). Effects of increased paternal involvement on fathers and mothers. In C. Lewis & M. O'Brien (Eds.), *Reassessing fatherhood: New observations on fathers and the modern family*. (pp. 109 – 125). London: Sage.

- Lamb-Parker, F., LeBuffe, P., Powell, G., & Halpern, E. (2008). A strength-based, systemic mental health approach to support children's social and emotional development. *Infants and Young Children*, 21 (1), 45 – 55.
- Lavee, Y. (2005). Correlates of change in marital relationships under stress: The case of childhood cancer. *Families in Society*, 86 (1), 112 – 120.
- Leavy, L. (2007). Feminist postmodernism and poststructuralism. In S. Hesse-Biber & P. Leavy (Eds.), *Feminist research practice*. (pp. 83 – 110). Thousand Oaks: Sage.
- LeBlanc, W. (1999). *Naked motherhood: Shattering illusions and sharing truths*. Sydney: Random House.
- Leckenby, D. (2007). Feminist empiricism: Challenging gender bias and 'setting the record straight'. In S. Hesse-Biber & P. Leavy (Eds.), *Feminist research practice*. (pp. 27 – 52). Thousand Oaks: Sage.
- Lee, C. (2004). Agency and purpose in narrative therapy: Questioning the postmodern rejection of metanarrative. *Journal of Psychology and Theology*, 32 (3), 221 – 231.
- Lee, C., & Gramotnev, H. (2007). Life transitions and mental health in a national cohort of young Australian women. *Developmental Psychology*, 43 (4), 877 – 888.
- Lefebvre, C., Carmean, B., Britton, N., Manock, S., et al. (1993). What made you decide to work or stay-at-home? *American Baby*, 55 (8), 32.
- Leonard, M. (2001). Old wine in new bottles? Women working inside and outside the household. *Women's Studies International Forum*, 24 (1), 67 – 78.

- Letherby, G. (2002). Childless and bereft? Stereotypes and realities in relation to 'voluntary' and 'involuntary' childlessness and womanhood. *Sociological Inquiry*, 71, 7 – 20.
- Levine, M. (1988). An analysis of mutual assistance. *American Journal of Community Psychology*, 16, 167 – 187.
- Lewis, S. (1991). Motherhood and employment: The impact of social and organisational values. In A. Phoenix, A. Woollett, & E. Lloyd (Eds.), *Motherhood: Meanings, practices and ideologies*. (pp. 195 – 215). London: Sage.
- Lewis, S., & Nicolson, P. (1998). Talking about early motherhood: Recognizing loss and reconstructing depression. *Journal of Reproductive and Infant Psychology*, 16, 177 – 197.
- Liebmann, G. (1996). Mum's the word in British daycare. *Policy Review*, 77, 11.
- Liddell, M. (1993). Child welfare and care in Australia: Understanding the past to influence the future. In C. Goddard & R. Carew (Eds.), *Responding to children: Child welfare practice*. (pp. 28 – 62). Melbourne: Longman Cheshire.
- Lincoln, Y., & Guba, E. (1985). *Naturalistic Enquiry*. Thousand Oaks: Sage.
- Logsdon, M., & Usui, W. (2006). The Postpartum Support Questionnaire: Psychometric properties in adolescents. *Journal of Child and Adolescent Psychiatric Nursing*, 19 (3), 145 – 157.
- Long, A., McCarney, S., Smyth, G., Magorrian, N., & Dillon, A. (2001). The effectiveness of parenting programmes facilitated by health visitors. *Journal of Advanced Nursing*, 34, 611 – 620.

- Lopata, H. (1971). *Occupation housewife*. London: Oxford University Press.
- Lupton, D. (2000). A love/hate relationship: The ideals and experiences of first-time mothers. *Journal of Sociology*, 36 (1), 50 – 63.
- Lupton, D., & Schmied, V. (2002). "The right way of doing it all": First time Australian mothers' decisions about paid employment. *Women's Studies International Forum*, 25 (1), 97 – 107.
- Maher, J., & Saujeres, L. (2007). To be or not to be a mother? Women negotiating cultural representations of mothering. *Journal of Sociology*, 43 (1), 5 – 21.
- Majewski, J. (1987). Social support and the transition to the maternal role. *Health Care for Women International*, 8, 397 – 407.
- Manias, E., & Street, A. (2001). Rethinking ethnography: Reconstructing nursing relationships. *Journal of Advanced Nursing*, 33 (2), 234 – 242.
- Mann, S., & Kelly, L. (1997). Standing at the crossroads of modern thought. *Gender and Society*, 11 (4), 391 – 408.
- Marmot, M. (1999). The solid facts: The social determinants of health. *Health Promotion Journal of Australia*, 9 (2), 133 – 139.
- Marotta, M. (1998). *From here to maternity: Motherhood, culture, and identity*. Unpublished doctoral dissertation, University of Massachusetts, Massachusetts.
- Marshall, H. (1991). The social construction of motherhood: An analysis of childcare and parenting manuals. In A. Phoenix, A. Woollett, & E. Lloyd (Eds.), *Motherhood: Meanings, practices and ideologies*. (pp. 66 – 85). London: Sage.

- Mason, C., Cauce, A., Gonzales, N., Hiraga, Y., & Grove, K. (1994). An ecological model of externalizing behaviors in African American adolescents: No family is an island. *Journal of Research on Adolescence*, 4, 639 – 655.
- Maushart, S. (2000). *The mask of motherhood: How becoming a mother changes our lives and why we never talk about it*. New York: Penguin.
- Mauthner, N. (1998). Reassessing the importance and role of the marital relationship in postnatal depression: Methodological and theoretical implications. *Journal of Reproductive and Infant Psychology*, 16, 157 – 175.
- Mauthner, N. (1999). Feeling low and feeling really bad about feeling low: Women's experiences of motherhood and postpartum depression. *Canadian Psychology*, 40, 143 – 161.
- Mauthner, N. (2002). *The darkest days of my life: Stories of postpartum depression*. Cambridge: Harvard University Press.
- Maynard, M. (1994). Methods, practice and epistemology: The debate about feminism and research. In M. Maynard & J. Purvis (Eds.), *Researching women's lives from a feminist perspective*. (pp. 10 – 26). London: Taylor and Francis.
- Mays, N., & Pope, C. (1995). Rigour and qualitative research. *British Medical Journal*, 311, 6997, 109 – 112.
- McAdams, D. (2001). The psychology of life stories. *Review of General Psychology*, 5 (2), 100 – 122.
- McCain, M. & Mustard, J. (1999). *Reversing the real brain drain: Early Years Study Final Report*. Available from www.children.gov.on.ca/mcys/documents/publications/beststart-early-en.pdf

- McCain, M., Mustard, F., & Shanker, S. (2007). *Early Years study 2: Putting science into action*. Toronto: Council for Early Childhood Development.
- McCoppin, B., & Gardner, H. (1994). *Tradition & reality: Nursing and politics in Australia*. Melbourne: Churchill Livingstone.
- McKenna, E. (1997). *When work doesn't work anymore: women, work and identity*. Australia: Hodder and Stoughton.
- McLeod, C. (2001). Teenage motherhood and the regulation of mothering in the scientific literature: The South African example. *Feminism & Psychology*, 11, 493 – 510.
- McLoyd, V. (1990). The impact of economic hardship on Black families and children: Psychological distress, parenting, and socioemotional development. *Child Development*, 61, 311 – 346.
- McMahon, M. (1995). *Engendering motherhood: Identity and self transformation in women's lives*. New York: Guilford Press.
- McMurray, A. (1995). *Future wellness: Choice, change and challenge*. Conference Proceedings, International conference: Health and wellbeing in a diverse society. Perth: Promaco.
- McRae, S. (2003). Constraints and choices in mothers' employment careers: A consideration of Hakim's preference theory. *British Journal of Sociology*, 54 (3), 317 – 338.
- McRobbie, A. (1991). The politics of feminist research: Between talk, text and action. In A. McRobbie (Ed.), *Feminism and youth culture: From Jackie to Just Seventeen*. (pp. 61 – 80). Basingstoke: Macmillan.

Merriam, S. (1998). *Qualitative research and case study applications in education*.

San Francisco: John Wiley and Sons.

Meyrick, J. (2006). What good is qualitative research? A first step towards a comprehensive approach to judging rigour/quality. *Journal of Health Psychology*, 11 (5), 799 – 808.

Miles, M. & Huberman, A. (1994). *Qualitative data analysis: An expanded sourcebook*. (2nd Ed). Thousand Oaks, CA: Sage Publications.

Milkie, M., Bianchi, S., Mattingly, M., & Robinson, J. (2002). Gendered division of childrearing: Ideals, realities, and the relationship to parental well-being. *Sex Roles*, 47 (1), 21 – 38.

Miller, J., & Stiver, I. (1997). *The healing connection: How women form relationships in therapy and in life*. Boston: Beacon.

Miller, S., & Sambell, K. (2003). What do parents feel they need? Implications of parents' perspectives for the facilitation of parenting programmes. *Children & Society*, 17, 32 – 44.

Mirowsky, J., & Ross, C. (2002). Depression, parenthood, and age at first birth. *Social Science and Medicine*, 54, 1281 – 1298.

Mitchell, S. (1997). *Icons, saints and divas*. Sydney: HarperCollins.

Moore, T. (2006). *Early childhood and long term development: The importance of the early years*. West Perth: Australian Research Alliance for Children and Youth. Available from

www.aracy.org.au/AM/Common/pdf/Topical%20Papers/Importance.pdf

- Morawski, J. (2001). Feminist research methods: Bringing culture to science. In D. Tolman & M. Brydon-Miller (Eds.), *From subjects to subjectivities*. (pp. 57 – 75). New York: New York University Press.
- Morell, C. (1994). *Unwomanly conduct: The challenges of intentional childlessness*. New York: Routledge.
- Morgan, D. (1998). *The focus group guidebook: Focus group kit 1*. California: Sage.
- Mulsow, M., Caldera, Y., Pursley, M., Reifman, A., & Huston, A. (2002). Multilevel factors influencing maternal stress during the first three years. *Journal of Marriage and the Family*, 64 (4), 944 – 956.
- Mustard, F. (2006). *Early child development and experience-based brain development - the scientific underpinnings of the importance of early child development in a globalised world*. Paper presented at the World Bank International Symposium on Early Child Development - A Priority for Sustained Economic Growth and Equity. Available from www.dete.sa.gov.au/wallaradistrict/files/links/Mustard_2006.pdf
- Newell, S. (1992). The myth and destructiveness of equal opportunities: The continued dominance of the mothering role. *Personnel Review*, 21 (4), 37 – 47.
- Nicolson, P. (1998). *Postnatal depression: Psychology, science and the transition to motherhood*. London: Routledge.
- Northern Territory Government (nd). *Building healthier communities: A framework for health and community services, 2004 – 2009*. Available from www.health.nt.gov.au
- Oakley, A. (1972). *Sex, gender and society*. Melbourne: Sun Books.

- Oakley, A. (1979). *Becoming a mother*. Oxford: Martin Robertson.
- Oakley, A. (1986). *From here to maternity*. Harmondsworth: Penguin.
- Oakley, A. (1998). Gender, methodology and people's way of knowing: Some problems with feminism and the paradigm debate in social science. *Sociology*, 32 (4), 701 – 731.
- Oberman, Y., & Josselson, R. (1996). Matrix of tensions: A model of mothering. *Psychology of Women Quarterly*, 20 (3), 341 – 359.
- Ochiltree, G., & Edgar, D. (1995). *Today's child care, tomorrow's children!* Melbourne: Australian Institute of Family Studies.
- O'Donnell, L. (1983). The social worlds of parents. In L. Lein & M. Sussman (Eds.) *The ties that bind: Men's and women's social networks*. (pp. 9 – 36). New York Haworth Press.
- Oke, N., Stanley, J., & Theobald, J. (2007). *The inclusive role of playgroups in Greater Dandenong*. Fitzroy, Vic: Brotherhood of St Laurence.
- Oldmeadow, J. (2007). Status generalization in context: The moderating role of groups. *Journal of Experimental Social Psychology*, 43, 273 – 279.
- Organisation for Economic Co-operation and Development (2006). *Starting strong ii: early childhood education and care*. Paris: OECD.
- Orthner, D., Jones-Sanpei, H., & Williamson, S. (2004). The resilience and strength of low income families. *Family Relations*, 53 (2), 159 – 167.
- Ortner, S., & Whitehead, H. (1981). *Sexual meanings: The cultural construction of gender and sexuality*. Cambridge: Cambridge University Press.
- Paris, R., & Dubus, N. (2005). Staying connected while nurturing an infant: A challenge of new motherhood. *Family Relations*, 54 (1), 72 – 83.

- Parker West, L. (2002). *Soccer moms, welfare queens, waitress moms, and super moms: Myths of motherhood in state media coverage of child care*. MARIAL working paper 16, Emory University. Available from www.marial.emory.edu/pdfs/wp016_02.pdf
- Pasch, L., & Bradbury, T. (1998). Social support, conflict, and the development of marital satisfaction. *Journal of Consulting and Clinical Psychology*, 66, 219 – 203.
- Pascoe, C. (1998). *Screening mothers: Representations of motherhood in Australian films from 1900 to 1988*. Unpublished doctoral dissertation, University of Sydney, New South Wales.
- Patton, M. (1990). *Qualitative evaluation and research methods*. New York: Sage Publications.
- Peters, K., Jackson, D., & Rudge, T. (2008). Research on couples: Are feminist approaches useful? *Journal of Advanced Nursing*, 62 (3), 373 – 380.
- Peterson, C. (2004). *Looking forward through the lifespan*. Frenchs Forest: Pearson Prentice Hall.
- Phares, V. (1993). Father absence, mother love, and other family issues that need to be questioned: Comments on Silverstein (1993). *Journal of Family Psychology*, 7 (3), 293 – 300.
- Phelps, J., Belsky, J., & Crnic, K. (1998). Earned security, daily stress and parenting: A comparison of five alternative models. *Developmental Psychopathology*, 10, 21 – 38.
- Phillips, S. (1991). *Beyond the myths: Mother-daughter relationships in psychology, history, literature and everyday life*. Sydney: Hampden Press.

- Phoenix, A., Woollett, A., & Lloyd, E. (1991). *Motherhood: Meanings, practices and ideologies*. London: Sage.
- Pistrang, N. (1984). Women's work involvement and experience of new motherhood. *Journal of Marriage and the Family*, 46, 433 – 447.
- Platts, G. (1999). *Voices of loss: Motherhood and the social construction of identity*. Unpublished doctoral dissertation, University of California, Los Angeles.
- Playgroup Australia (Inc), (2007). *Boom time for babies and playgroups*. Available from www.playgroupaustralia.com.au/go/news/boom-time-for-babies-and-playgroups
- Playgroup WA (Inc), (2003). *Constitution* (as amended). Available from Playgroup WA (Inc), PO Box 61, North Perth, WA 6906.
- Playgroup WA (Inc), (2004). *Playgroup Charter*. Available from Playgroup WA (Inc), PO Box 61, North Perth, WA 6906.
- Playgroup WA (Inc), (2007). *Annual Report*. Available from Playgroup WA (Inc), PO Box 61, North Perth, WA 6906.
- Playgroup WA (Inc), (2008). *Annual Report*. Available from Playgroup WA (Inc), PO Box 61, North Perth, WA 6906.
- Porter, P. (1988). Social policy: Education and women in Australia. In C. Baldock & B. Cass (Eds.), *Women, social welfare, and the state in Australia*. (pp. 249 – 261). Sydney: Allen & Unwin.
- Prilleltensky, I. (2001). Value based praxis in community psychology: Moving towards social justice and social action. *American Journal of Community Psychology*, 29, 747 – 777.

- Probert, B. (2002). 'Grateful slaves' or 'self-made women': A matter of choice or policy? *Australian Feminist Studies*, 17 (37), 7 – 17.
- Priel, B. & Besser, A. (2000). Dependency and self-criticism among first-time mothers: The roles of global and specific support. *Journal of Social and Clinical Psychology*, 19 (4), 437 – 450.
- Puig, A., Koro-Ljungberg, M., & Echevarria-Doan, S. (2008). Social constructionist family systems research: Conceptual considerations. *The Family Journal*, 16 (2), 139 – 146.
- Queensland Government (2006). *Towards an early years strategy*. Available from www.communities.qld.gov.au
- Raddon, A. (2002). Mothers in the Academy: Positioned and positioning within discourses of the 'successful academic' and the 'good mother'. *Studies for Higher Education*, 27 (4), 387 – 403.
- Raeff, C. (1996). A cultural analysis of maternal self-conceptions. *Journal of Applied Developmental Psychology*, 17, 271 – 306.
- Ramazanoglu, C. (1992). On feminist methodology: Male reason versus female empowerment. *Sociology*, 26 (2), 207 – 212.
- Ramazanoglu, C., & Holland, J. (2002). *Feminist methodology: Challenges and choices*. London: Sage.
- Rappaport, J. (1977). *Community psychology: Values, research, and action*. New York: Holt, Rinehart & Winston.
- Rappaport, J. (1984). Studies in empowerment: Introduction to the issue. *Prevention in Human Services*, 3, 1 – 7.

- Reid, K. (2003). Setting women to work: The assignment system and female convict labour in Van Diemen's Land, 1820 – 1839. *Australian Historical Studies*, 121, 1 – 25.
- Reiger, K. (1985). *The disenchantment of the home: Modernizing the Australian family, 1880 – 1940*. Melbourne: Oxford University Press.
- Reinharz, S. (1992). *Feminist methods in social research*. New York: Oxford University Press.
- Render, J., & Hughes, J. (2004). The value mothers place on paid work and their feelings of life control. *Family Matters*, 68, 76 – 83.
- Reynolds, A., Ou, S., & Topitzes, J. (2004). Paths of effects of early childhood intervention on educational attainment and delinquency: A confirmatory analysis of the Chicago Child-Parent Centers. *Child Development*, 75 (5), 1299 – 1328.
- Reynolds, J., & Wetherell, M. (2003). The discursive climate of singleness: The consequences of women's negotiation of a single identity. *Feminism and Psychology*, 13 (4), 489 – 510.
- Rice, P., & Ezzy, D. (2000). *Qualitative research methods: A health focus*. Melbourne: Oxford University Press.
- Rice, M., Records, K., & Williams, M. (2001). Postpartum depression: Identification, treatment, and prevention in primary care. *Clinical Letter for Nurse Practitioners*, 5 (4), 1 – 4.
- Rich, A. (1986). *Of woman born: Motherhood as experience and institution*. New York: W. W. Norton.

- Richardson, D. (1993). *Women, motherhood and childrearing*. London: Virago Press.
- Roe, J. (1988). The end is where we start from: Women and welfare since 1901. In C. Baldock & B. Cass (Eds), *Women, social welfare and the state in Australia*. (pp. 1 – 19). Sydney: Allen & Unwin.
- Rogan, F., Barclay, L., Everitt, L., & Wyllie, A. (1997). 'Becoming a mother' – developing a new theory of early motherhood. *Journal of Advanced Nursing*, 25, 877 – 885.
- Ross, C., & Van Willigen, M. (1996). Gender, parenthood, and anger. *Journal of Marriage and the Family*, 58, 572 – 584.
- Ruddick, S. (1980). Maternal thinking. *Feminist Studies*, 6 (2), 342 – 367.
- Sanson, A., & Wise, S. (2001). Children and parenting: The past hundred years. *Family Matters*, 60, 36 – 45.
- Sarantakos, S. (1998). *Social research*. Melbourne: Macmillan Education.
- Sarason, B., Sarason, R., & Pierce, G. (1990). Traditional views of social support and their impact on assessment. In B. Sarason, I. Sarason, & G. Pierce (Eds.), *Social support: An interactional view* (pp 1 – 26). New York: Wiley.
- Schussler Fiorenza, E. (1987). The endless day: Introduction. In A. Carr (Ed.). *Women, work and poverty*. Edinburgh: T & T Clark Ltd.
- Schwartz, J. (1993). *The mother puzzle: A new generation reckons with motherhood*. New York: Simon and Schuster.
- Schweinhart, L., Barnes, V., & Weickart, D. (1993). High/Scope Perry Preschool. *Raising Minority Academic Achievement*, 10, 134 – 136. Available from www.aypf.org/publications/rmaa/pdfs/HighScopePerry.pdf

- Scott, D., Brady, S., & Glynn, P. (2001). New mother groups as a social network intervention: Consumer and maternal and child health nurse perspectives. *Australian Journal of Advanced Nursing*, 18 (4), 23 – 29.
- Seimyer, L., Edhborg, M., Lundh, W., & Sjogren, B. (2004). In the shadow of maternal depressed mood: Experiences of parenthood during the first year after childbirth. *Journal of Psychosomatic Obstetrics and Gynecology*, 25, 23 – 34.
- Shah, S., & Corley, K. (2006). Building better theory by bridging the quantitative-qualitative divide. *Journal of Management Studies*, 43 (8), 1821 – 1835.
- Shelton, N., & Johnson, S. (2006). 'I think motherhood for me was a bit like a double-edged sword': The narratives of older mothers. *Journal of Community and Applied Social Psychology*, 16, 316 – 330.
- Shonkoff, J., & Phillips, D. (Eds.) (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington: National Academy Press.
- Shore, R. (1996). *Rethinking the brain: New insights into early development*. New York: Families and Work Institute.
- Sim, J. (1998). Collecting and analysing qualitative data: Issues raised by the focus group. *Journal of Advanced Nursing*, 28 (2), 345 – 352.
- Simon, R. (1997). The meanings individuals attach to role identities and their implications for mental health. *Journal of Health and Social Behaviour*, 38, 256 – 274.
- Sims, M. (2002). *Designing family support programmes: Building children, and community resilience*. Altona, Vic: Common Ground Press.

- Singer, P.A., Martin, D.K. & Kelner, M. (1999). Quality end of life care: Patient's perspectives. *The Journal of the American Medical Association*, 281 (2), 163 – 168.
- Smith, D. (1995). How play influences children's development at home and school. *Leisure Today*, October, 3 – 7.
- Smith, J. A. (1995a). Semi-structured interviewing and qualitative analysis. In J. A. Smith & R. Harre & L. Van Langenhove (Eds.), *Rethinking methods in psychology* (pp. 9 - 26). London: Sage Publications, Inc.
- Smythe, S., & Isserlis, J. (2004). The good mother: Exploring mothering discourses in family literacy texts. *Literacy and Numeracy Studies*, 13 (2), 23 – 39.
- Solomon, C., Acock, A., & Walker, A. (2004). Gender ideology and investment in housework: Postretirement change. *Journal of Family Issues*, 25, 1050 – 1571.
- Solomon, M., Pinstrang, N., & Barker, C. (2001). The benefits of mutual support groups for parents of children with disabilities. *American Journal of Community Psychology*, 29 (1), 113 – 132.
- South Australian Government (nd). *Child protection review*. Available from www.familiesandcommunities.sa.gov.au
- Sroufe, L., Egeland, B., Carlson, E., & Collins, W. (2005). *The development of the person: The Minnesota study of risk and adaptation from birth to adulthood*. New York: Guilford Press.
- Stanley, F., Richardson, S., & Prior, M. (2005). *Children of the lucky country*. Australia: Pan Macmillan.

- Stanley, L., & Wise, S. (1993). *Breaking out again: Feminist ontology and epistemology*. London: Routledge.
- Stehlik, D. (1993). *Untying the knot: A socialist-feminist analysis of the social construction of care*. Joondalup: Edith Cowan University.
- Stets, J., & Burke, P. (1994). Inconsistent self-views in the control identity model. *Social Science Research*, 23, 236 – 262.
- Stets, J., & Cast, A. (2007). Resources and identity verification from an identity theory perspective. *Sociological Perspectives*, 50 (4), 517 – 543.
- Stewart, D., & Shamdasani, P. (1990). *Focus groups: Theory and practice*. London: Sage Publications.
- Stone, G., & McKenny, P. (1998). Non residential father involvement: A test of mid-range theory. *Journal of Genetic Psychology*, 159 (3), 313 – 336.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Grounded theory procedures and techniques*. Thousand Oaks, CA: Sage.
- Summers, A. (1975). *Damned whores and God's police: The colonization of women in Australia*. Ringwood: Penguin Books.
- Summers, A. (2003). *The end of equality: Work, babies and women's choices in 21st century Australia*. Sydney: Random House.
- Swain, S., & Howe, R. (1995). *Single mothers and their children: Disposal, punishment and survival in Australia*. Melbourne: Cambridge University Press.
- Swan, E. (2008). Let's not get too personal: Critical reflection, reflexivity and the confessional turn. *Journal of European Industrial Training*, 32 (5), 385 – 399.

- Swigonski, M. (1993). Feminist standpoint and the questions of social work research. *Affilia – Journal of Women and Social Work*, 8 (20), 171.
- Tajfel, H., & Turner, J. (1979). An integrative theory of intergroup conflict. In W. Austin & S. Worchel (Eds.), *The social psychology of intergroup relations*. (pp. 33 – 47). California: Brooks/Cole.
- Tanner, L., Haddock, S., Zimmerman, T., & Lund, L. (2003). Images of couples and families in Disney feature-length animated films. *American Journal of Family Therapy*, 31, 355 – 373.
- Tasmanian Government (2005). *FCYHS strategic plan for early childhood, 2005 – 2008*. Available from www.dhhs.tas.gov.au
- Tayler, C., Tennent, L., Farrell, A., & Gahan, D. (2002). Use and integration of early childhood services: Insights from an inner city community. *Journal for Australian Research in Early Childhood Education*, 9 (1), 113 – 123.
- Taylor, J. (1998). Womanism: A methodological framework for African American women. *Advances in Nursing Science*, 21 (1), 53 – 64.
- Taylor, R., Casten, R., & Flickinger, S. (1993). The influence of kinship social support on the parenting experiences and psychosocial adjustment of African American adolescents. *Developmental Psychology*, 29, 382 – 388.
- Taylor, R., & Roberts, D. (1995). Kinship support and maternal and adolescent well-being in economically disadvantaged African American families. *Child Development*, 66, 1585 – 1597.
- Thoits, P. (1991). On merging identity theory and stress research. *Social Psychology Quarterly*, 54, 101 – 112.

- Thompson, L. (1992). Feminist methodology for feminist studies. *Journal of marriage and the Family*, 53, 3 – 18.
- Thurer, S. (1994). *The myths of motherhood: How culture reinvents the good mother*. Boston: Houghton Muffin.
- Timber, G., Volger-Elias, D., & McGill, K. (2007). Strategies for promoting generalization of social communication skills in pre-schoolers and school-aged children. *Language Disorders*, 27 (2), 167 – 181.
- Tomison, A. (2001). A history of child protection: Back to the future? *Family Matters*, 60, 46 – 57.
- Tricket, E. (1996). A future for community psychology: The contexts of diversity and the diversity of contexts. *American Journal of Community Psychology*, 24, 109 – 234.
- Trinder, L. (2000). Reading the texts: Postmodern feminism and the doing of research. In B. Fawcett, B. Featherstone, J. Fook & A. Rossiter (Eds.). *Practice and research in social work: Postmodern feminist perspectives* (pp. 39 – 61). London: Routledge.
- Tucci, J., Mitchell, J., & Goddard, C. (2004). *The concerns of Australian parents*. Melbourne: Australian Childhood Foundation and the National research Centre for the Prevention of Child Abuse. Available from www.childhood.org.au
- Tucci, J., Mitchell, J., & Goddard, C. (2005). *The changing face of parenting*. Australian Childhood Foundation. Available from www.childhood.org.au
- Tuhiwai Smith, L. (2001). *Decolonizing methodologies: Research and indigenous peoples*. London: Zed Books.

- Turner, J. (1982). Towards a cognitive redefinition of the social group. In H. Tajfel (Ed.), *Social identity and intergroup relations* (pp. 15 – 40). Cambridge, England: Cambridge University Press.
- Umberson, D., & Terling, T. (1997). The symbolic meaning for relationships: Implications for psychological distress following relationship loss. *Journal of Social and Personal Relationships*, 14, 723 – 744.
- Ussher, J., Hunter, M., & Brown, S. (2000). Good, bad or dangerous to know: Representations of femininity in narrative accounts of PMS. In C. Squire (Ed). *Culture in Psychology*. (pp. 87 – 99). London: Routledge.
- Uttal, L. (1996). Custodial care, surrogate care, and co-ordinated care: Employed mothers and the meaning of child care. *Gender and Society*, 10, 291 – 311.
- Vejar, C. (2003). *A qualitative approach toward understanding the transition from career to fulltime motherhood*. Unpublished doctoral dissertation, Virginia State University.
- Victorian Government (nd). *Putting our priorities into action*. Available from www.dvc.vic.gov.au
- Villani, S., & Ryan, J. (1997). *Motherhood at the crossroads: Meeting the challenge of a changing role*. New York: Plenum Publishing.
- Walker, J. (2003). Radiating messages: An international perspective. *Family Relations*, 52 (4), 406 – 417.
- Walter, C. (1986). *The timing of motherhood*. Lexington: Lexington Books.
- Wandersman, A., & Nation, M. (1998). Urban neighborhoods and mental health. *American Psychologist*, 53, 647 – 656.

- Watkins, S., Rueda, M., & Rodriguez, M. (1999). *Introducing feminism*. St Leonards: Allen & Unwin.
- Watts, R., & Serrano-Garcia, I. (2003). The quest for a liberating community psychology: An overview. *American Journal of Community Psychology*, 31, 73 – 78.
- Wearing, B. (1984). *The ideology of motherhood: A study of Sydney suburban mothers*. Sydney: George Allen and Unwin.
- Weaver, J., & Ussher, J. (1997). How motherhood changes life: A discourse analysis study with mothers of young children. *Journal of Reproductive and Infant Psychology*, 15 (1), 51 – 68.
- Weeda-Zuidersma, J. (2007). *Keeping mum: Representations of motherhood in contemporary Australian literature – a fictocritical exploration*. Unpublished doctoral dissertation, University of Western Australia.
- Western Australian Government (2006). *Early Years strategic framework*. Available from www.community.wa.gov.au
- Whelehan, I. (1995). *Modern feminist thought: From the second wave to 'post-feminism'*. Edinburgh: Edinburgh University Press.
- Whitbeck, L., Hoyt, D., & Ackley, K. (1997). Families of homeless and runaway adolescents: A comparison of parent/caretaker and adolescent perspectives on parenting, family violence, and adolescent conduct. *Child Abuse & Neglect*, 21, 517 – 528.
- Whiteside, M. (1998). The parental alliance following divorce: An overview. *Journal of Marital and Family Therapy*, 24, 3 – 24.

- Whitley, R., & Crawford, M. (2005). Qualitative research in psychiatry. *Canadian Journal of Psychiatry*, 50 (2), 108 – 114.
- Whyte, J., Daly, A., Bujia, P., & Smyth, N. (nd). *Reconceptualising community playgroups*. Dublin: Trinity College. Available from www.khf.ie
- Wiersma, B. (2001). *The gendered world of Disney: A content analysis of gender themes in full-length animated Disney feature films*. Unpublished doctoral dissertation, South Dakota State University.
- Wijnberg, M., & Weinger, S. (1998). When dreams wither and resources fail: The social support systems of poor single mothers. *Families in Society*, 72 (2), 212 – 219.
- Wilkinson, S. (1997). Feminist psychology. In D. Fox & I. Prilleltensky (Eds.), *Critical psychology: An introduction*. (pp. 247 – 264). London: Sage Publications.
- Wilkinson, S. (2001). Theoretical perspectives on women and gender. In R. Unger (Ed.), *Handbook of the psychology of women and gender*. New York: John Wiley & Sons.
- Willgerodt, M. (2003). Using focus groups to develop culturally relevant instruments. *Western Journal of Nursing*, 25, 798 – 814.
- Woollett, A. (1991). Having children: Accounts of childless women and women with reproductive problems. In A. Phoenix, A. Woollett, & E. Lloyd (Eds.), *Motherhood: Meanings, practices and ideologies*. (pp. 47 – 65). London: Sage.

- Woollett, A., & Marshall, H. (2000). Motherhood and mothering. In J. Ussher (Ed), *Women's health: Contemporary international perspectives* (pp. 312 – 319). Leicester: BPS Books.
- Xu, Y., & Burleson, B. (2001). Effects of sex, culture and support type on perceptions of spousal social support: An assessment of the 'support gap' hypothesis in early marriage. *Human Communication Research*, 27. 535 – 566.
- Yoshikawa, H. (1995). Long term effects of early childhood programs on social outcomes and delinquency. *The Future of Children*, 5 (3), 51 – 75.
- Zill, N., Moore, K., Smith, E., Steif, T., & Coiro, M. (1995). The life circumstances and development of children in welfare families: A profile based on national survey data. In P. Chase-Lansdale & J. Brooks-Gunn (Eds), *Escape from poverty: What makes a difference for children?* (pp. 38 – 59). New York: Cambridge University Press.
- Zinth, A. (2000). Let's play. *American Baby*, 62 (5), 48.

Appendix A

Demographics of Participants

The following short profiles of the participants describe them at the time that they were interviewed. As much identifying data as possible has been removed, for ethical reasons.

One-on-one Interview Participants

Debbie. Debbie is a married woman in her early thirties, who lives in the hills area of Perth, and is a mother to three children, a five and a half year old daughter, and two sons, one aged three and half years and one aged one year. Debbie has a postgraduate degree, and prior to having children she worked as an office assistant, though she is not currently employed. She has been attending playgroup for five and a half years, and previously volunteered as the playgroup's secretary.

When I arrived for the interview with Debbie, it seemed a very stereotypical country home, with lots of white cloths, wooden furniture, crockery on display, and the smell of home baking. Debbie revealed that she had recently stopped attending playgroup after attending for 5 ½ years, but said that this was more to do with changes in family needs than issues with playgroup itself.

During the interview, Debbie seemed initially wary and cautious, but soon relaxed to reveal that while she was generally happy with her life, things were not quite as she thought they might be before she had children. There were several reasons she might feel this way: firstly, Debbie had had postnatal depression after the births of her children; secondly, becoming a mother had made her question the way in which she was parented; and, thirdly, becoming a parent widened the gap between Debbie and her mother rather than closed it. I offered Debbie a list of

counselling services, but she assured me that she was seeing relevant professionals who were assisting her.

Julie. A married mother of twin boys aged two years, Julie lives close to the city. While she stopped attending playgroup for a short time, she has attended in total for one and a half years. Julie is aged in her early thirties, and has a degree. Prior to having children, she worked for the Department of Community Development, but is currently not employed outside the home.

Julie is very eloquent, and is not afraid to speak her mind. She lamented that she “can’t quite be the mum I’d like to be” because having twins from her first pregnancy meant that Julie was not ever a mother to a baby where she could spend one-on-one time, bonding. I felt that Julie had an idealised vision of what motherhood would be like, and she sees this thwarted by the birth of twins (“I didn’t get the luxury of being a mum to one child only”), whereas, in reality, the birth of a singular child might have also not matched the expectations that Julie had of motherhood.

Julie had researched quite a bit prior to becoming a parent, saying that she read books and researched on the internet, in addition to completing undergraduate studies in developmental psychology, so she had some idea of what to expect while not having had much experience with children. However, during the interview, she continually returned to the difficulties associated with being the mother of twins and how this changed her perception of parenting.

Kelly. Kelly is the president of her playgroup, which she has attended for two years. She is a mother of two children, a son aged three years and a daughter aged one year. Aged in her early forties, Kelly was previously a lab technician, and

is currently not employed in the paid workforce. She lives on the Swan River with her husband and children.

Kelly is the oldest participant that I interviewed, and she was regretful that both she and her husband were somewhat older than their friends, having left the decision to have children until later in their lives. In particular, Kelly lamented that her own mother had died prior to Kelly having children, and so Kelly could not draw on her mother's experience to help in the mothering role.

Kelly stated that she would not seek re-election at the upcoming playgroup AGM when I interviewed her. She stated that playgroup was sometimes time consuming from an administrative aspect, which seemed to annoy her somewhat. When I telephoned Kelly later, she stated that I must have caught her on a bad day, as she generally enjoys the social aspect of playgroup, even though she is considerably older than the other mothers that attend.

Leonie. Leonie lives in a north-eastern suburb of Perth with her husband, and has three children, a daughter aged six years, and two sons, one aged four years and one aged one year. She has been attending playgroup for five years, and is aged in her late thirties. Prior to having children she worked as a bookkeeper, and while she worked part-time for some years after having the first two children, she has not been employed in the paid workforce since her third child was born.

Leonie has been attending the same playgroup, within walking distance from her home, for five years, and socialises with other playgroup members out of playgroup time. Leonie's house is fairly new, and she said that she and her husband built it to his specifications. It is neat and tidy, without being obsessively

so. I got the feeling that Leonie is not entirely content with her home life, and I felt that she was 'accepting her lot' in life: there was an air of resignation about her when she spoke about her husband and his attitudes to child-rearing, particularly how they differ to her own. In my interview notes I have scribbled "escapes life through playgroup", and I remember thinking that, for Leonie, playgroup was definitely a lifeline to support and understanding from other mothers.

Mandy. A married mother of four children, aged in her late thirties, Mandy lives in a north-eastern suburb of Perth. She has a daughter aged nine years, twins (a boy and a girl) aged seven years and a daughter aged three and a half years. Prior to having children Mandy worked as a computer operator, and is currently employed on a part-time basis in childcare duties.

When I visited Mandy's home for the interview, it was very clean and neat. At the end of the interview, after I turned the tape recorder off, she revealed that keeping her home immaculate was very important to her, even though it was difficult with four young children.

Mandy has attended playgroup for nine years. Her original playgroup had closed down – the church had decided not to continue playgroup on their premises – but Mandy and several other members had recently joined another playgroup in her area. Mandy was the treasurer at this first playgroup for several years.

Meredith. Meredith is aged in her mid thirties, and has two sons, one aged eight years and one aged two years. She lives in the northern suburbs with her de facto husband, and has attended playgroup for six months. Prior to having her second child, Meredith was employed as a cleaner, but is not currently in the paid

workforce. She is considered moderately mobile, having moved twice in the last five years.

Meredith has only recently joined playgroup because her youngest son had no regular playmates, and she felt that playgroup would help him with socialisation. Meredith has endured some hardships in her life: for example, she currently lives in the same area that she grew up in, which, according to Meredith, is well known for its high percentage of residents that use and abuse drugs regularly; Meredith intimates that she was once a regular illicit drug and alcohol user herself, but says that is in her past; her mother has had several partners, some of who were abusive, and this lack of stability had been perpetuated in Meredith's previous relationships with men, which she describes as volatile and short-lived.

Despite the challenges of coming from a difficult background, I observed during the interview that there are indications that Meredith and her children are well cared for: the house, a Homeswest property, was very stark from the outside, but inside it was neat and clean; her youngest son was obviously well fed and there was a bowl of fruit on the table; there were photos around the house of smiling children; importantly, Meredith's son was happy, laughing and playing quietly. Meredith spoke about both sons and their achievements with obvious love and pride.

Naomi. Naomi is a married mother of two children, a daughter aged three years and a son aged one and a half years. She lives in a suburb close to the city, and is in her early thirties. Prior to having children Naomi worked in human resources, but is currently not part of the paid workforce. She has attended

playgroup for three years, and as a founding member of the playgroup, was its inaugural president.

Naomi had only moved into her home several weeks before I met her, and spoke of a settling in period which was both exciting and challenging for all family members as routines and rituals were reset. I got the feeling that routines and rituals were very important to Naomi, as she outlined a very precise daily schedule, supplemented by a quite rigid schedule followed at playgroup, admitting that it was “quite structured” more than once when I interviewed her.

In my opinion, Naomi is very community minded. She is involved in several community projects at a grass roots level, and took pride in her involvement. I have met mutual acquaintances on other projects since I spoke to Naomi, and she is always referred to in terms of a “local treasure”, and I would say she is held in high regard by members of her community. Her image is important to Naomi, for example, she recalled that when she brought her daughter home after birth she had a dislocated hip in a brace and “I cried. I thought everyone was going to be looking at me in the shopping centre with a deformed child”.

Renee. Mother to one daughter aged two years, Renee has been attending playgroup for one and a half years. She is aged in her late twenties, the youngest participant that I interviewed for this study, and has worked as a swimming teacher on a casual basis for many years. When I interviewed her, Renee was living in a coastal Perth suburb, but indicated that they were soon moving to regional Western Australia “for a challenge”. While Renee acknowledged there are expectations placed on mothers, she did not seem to be pressured by those expectations, broadly speaking.

Stephanie. Stephanie lives in a north-eastern suburb of Perth with her husband and their four children. She has three sons aged nine, seven and two years and a daughter aged three years. Stephanie works part time as an administrator. She is aged in her late thirties, and has attended playgroup for eight and a half years, where she was treasurer for three years.

Stephanie attended a playgroup that originally began as a mothers' group that met weekly in each others' houses; when the children neared a year old, they were becoming "too boisterous" and joined a playgroup. Stephanie seemed to be quite involved in the playgroup, explaining that when she became Treasurer, the playgroup was quite run down with little money in the bank and in desperate need of new equipment; Stephanie and the then-President worked together to make the playgroup one of the most successful in the area. Despite her work in improving the playgroup, Stephanie stated that if she didn't enjoy going to playgroup, even if her children did, she would not go.

Stephanie intimated that she had had quite a difficult time when her children were younger, with the two eldest having language difficulties that required attendance at a Language Development Centre, as well as private speech therapy and psychological counselling. Despite these difficulties, Stephanie was very philosophical about the hurdles she faced, stating "there's a lot more in life that's harder than that". She had a very laissez-faire attitude to parenting ("I just go with the flow a lot"), and did not seem very stressed, despite having four children within seven years!

Susan. Susan is aged in her early thirties, and has attended playgroup for two years, where she is the treasurer. Susan and her husband live in a suburb on

the Swan River with their two children, a son aged three years and a daughter aged eight months. Susan was a nutritionist prior to having children, and was career-focussed, and had some doubts about what sort of mother she would be prior to having children. She acknowledges that parenting is challenging, but revels in mothering, even though she finds society's expectations untenable. In particular, Susan argued that mothers were in a no-win situation, whether they stayed home full-time or undertook paid employment, whether they used formal childcare or not.

Vicky. Vicky is currently employed as a nurse, an occupation she held prior to the birth of her three children, two sons aged five years and one year, and a daughter aged three years. Vicky is married, aged in her early thirties and lives in an inner western suburb of Perth. Vicky has attended playgroup for five years, where she has been the registrar.

When I arrived at Vicky's house for the interview, her mother and sister were just leaving after dropping in for coffee. During the interview, Vicky revealed that they often called in, sometimes unannounced, and that she found the family support and camaraderie invaluable. Additionally, she commented that the support that she received from her playgroup mothers was also most welcome, and saved her in several 'sticky' situations. Apart from playgroup, Vicky is heavily involved in gymbaroo, and believes that they are complementary programs. She recognised that parenting was more difficult when first becoming a mother, but seemed to have adjusted to the role well, with support from several sources.

Focus Group Participants

Cassie. A married woman, aged in her early thirties, Cassie lives in an eastern suburb of Perth. She has a daughter aged two years, and has been

attending playgroup for two years. Prior to her daughter's birth, Cassie was a hairdresser, but is not in the paid workforce at the moment. She joined the current playgroup she attends when it originated as a mother's group through the government run Baby Health Centre.

Cassie was a quiet focus group participant, but she contributed to the conversation when it turned to a discussion about the public perception of mothers. Her comments indicated that she felt judged by others when in public, and I felt that she was wary of the public persona she was projecting. Additionally, I noted in my journal the belief that Cassie could "do mothering on her own is important [to her]".

Chloe. Chloe has recently migrated to Perth from the eastern states of Australia, and has been attending playgroup for less than one year. She did not attend playgroup prior to coming to Perth, where she lives in a northern suburb. Aged in her early thirties, she has a son aged two and a half years. She has recently married, and before her son's birth, Chloe was a child care worker, but is not currently in the paid workforce.

Chloe expressed quite early in the focus group she attended that she still felt isolated, as she had migrated to Perth from the eastern states less than a year prior to our interview. When I asked whether she meant geographical isolation, emotional isolation or social isolation, she answered "all of them". She elaborated by saying that she had joined a playgroup that was borne from a mothers' group, so she felt a little like "an intruder". The other members of the playgroup laughed and said that she was a wonderful asset to the group, and they spoke to her with warmth. While there was no evidence of Chloe being excluded while I visited the

playgroup, it does not make her isolation any less real. I spoke to her privately before I left the playgroup and Chloe intimated that the feeling of isolation was not continuous nor debilitating; it was just that sometimes she felt it difficult that she did not have a complete shared history with the other playgroup mothers and that she was missing her own mother, who was still in the eastern states. She declined my offer to refer her to appropriate services. In retrospect, Chloe did not seem despondent or negative; I think that she was being honest in her self-diagnosis regarding the cause of her feelings of isolation.

I found Chloe to be a vibrant woman with a happy outlook on life (despite her reports on feeling isolated). She expressed a need for support from other mothers, but also a tendency to “put on a face”, and to pretend that she was comfortable with her mothering skills and abilities, even though that was not always strictly true. I felt Chloe was someone who had found mothering to be more difficult than she anticipated, but that it was becoming easier as time progressed.

Ella. Ella has been attending playgroup for almost two years. Aged in her late twenties, she has two children, a daughter aged three years, and a one month old son, and lives in the outer suburbs of Perth. Ella has a degree and worked as a function co-ordinator before her children were born; she is currently employed on a casual basis. Ella's family is considered highly mobile, in that they have moved house four times in five years, three moves of which were in the last two years.

At the time of the focus group, Ella was living in a de facto relationship with the father of her two children, and married her partner not long after the interview. When speaking to Ella some time after the focus group, to clarify a few points, she happily shared the news that they were expecting their third child. She was very

vocal throughout the focus group, and answered the many questions I asked afterwards in great detail.

Kendra. Kendra is a married mother of one child, a son aged just over two years, who lives in the northern suburbs of Perth. She has been a member of playgroup for two years, and is aged in her late thirties. Kendra has a degree in law, and continues to practice at a city law firm after taking maternity leave for three months.

Kendra joined playgroup when it was extended from her mothers' group, which she joined when her son was six weeks old. It is difficult to know focus group members in the same depth as one-on-one interview participants, because the one-on-one rapport is not established and developed. However, I felt that Kendra was a very strong woman, with strong opinions and views. She remained silent and thoughtful until she had something 'meaningful' to add to the discussion, at which time she had no hesitation in putting her ideas forward. Despite this outward show of strength, I felt Kendra was vulnerable, and unsure of her parenting practices.

Megan. Megan lives in a north-eastern suburb of Perth with her husband and two children, a daughter aged four and a half years and a son aged almost three years. She is aged in her late thirties and has attended playgroup for approximately one and a half years. Before having children, Megan worked as a hairdresser. She has not been in the paid workforce since having children, but is now considering setting up a home based business. During the focus group, Megan's contributions were thoughtful and measured. She did not speak about many issues, but she spoke a lot about how her sense of identity lies within the mothering role.

Melanie. Melanie is a married mother of two children, a daughter aged six and a half years and a son aged three and a half years. She lives in the eastern suburbs of Perth, and is aged in her early thirties. Melanie has attended playgroup for four years in total, and worked as a deli assistant prior to having children. She is currently not employed in the paid workforce.

Melanie was quite outspoken in the focus groups, and also provided rich data when contacted later for clarification of some issues. She seemed to recognise that there can be an identity crisis when becoming a mother, as she was most vocal within the focus group when these issues came up.

I asked Melanie about her absence from playgroup, and she said that she attended one playgroup for two years and made two really good friends. They then moved house, so she followed them to the new playgroup they were attending, but she did not feel a “connection” with the other mothers, so stopped going after a year. It was during this absence that she realised that she missed her original playgroup friends, and so returned to that playgroup where she has been ever since. Melanie was keen for me to understand that her break was not about playgroup, as such, it was about the “right playgroup”.

Paula. Paula lives in a de facto relationship with her partner and their three sons, who are aged eleven, eight and four and a half years, in a north-eastern Perth suburb. She is aged in her late thirties, and works in the business she owns with her partner. Paula has been a committee member of her playgroup, which she has attended for nine and a half years. She had a short break from playgroup before her third son was born; this is because the two oldest children were at school, and until her son was at an age where Paula felt he would benefit from

playgroup – approximately six months old – she chose not to attend. As a business owner, Paula was grateful that she could work flexible hours that allowed her to attend playgroup. Ironically, Paula was one of only two mothers I interviewed who worked full-time in paid employment, yet she was the most vocal of all participants about the importance of the role that full-time stay-at-home mothers play in society.

Peyton. Peyton is married with a daughter aged two years, and has been attending playgroup since joining a mothers' group formed when her daughter was six weeks old. She is aged in her late twenties, and lives in a northern Perth suburb. Peyton was formerly a secretary, before her daughter was born, but is no longer part of the paid workforce.

Peyton did not contribute much to the focus group discussion: firstly, she apologetically came in late, laughingly saying it had been "one of those days already"; and, secondly, she spent quite a bit of time chasing her daughter around the playgroup, flipantly saying that she was a bit of a handful. Peyton lives in a northern Perth suburb, and, prior to having her daughter, worked full time, but stated that it was unlikely that she would return to paid work in the foreseeable future.

Stella. Stella is group leader of her playgroup session, which she has been attending for two years. She has one son aged almost two and a half years, and is aged in her mid thirties. Stella lives in a northern suburb with her husband, and continues to work as an accountant.

Stella was very much the dominant person at the playgroup during the focus group interview. She was loud, with a roaring laugh, and led conversation but in a non-threatening way. Stella works part-time, after taking six months maternity

leave after the birth of her son. Despite her apparent domination in conversation, she allowed other focus group members to put forward their views, and despite her garrulousness, was quite thoughtful at times, and gathered her thoughts before voicing her opinion.

Stella joined playgroup when it expanded from a mothers' group when her son was a few months old. She was most memorable to me for her conversation regarding mothers in paid employment versus full-time stay-at-home mothers; she held quite strong views on this topic. It seemed to me that she was, in part, trying to convince herself that, despite being in paid employment, she was still a 'good' mother.

Yasmine. Yasmine is aged in her early thirties, and has two daughters aged six and a half years and three and a half years. Prior to having children she worked as an administrator, though she is not currently in the paid work force. Yasmine lives in a north-eastern Perth suburb with her de facto husband, and has attended playgroup for six and a half years. The playgroup she is currently attending is the second playgroup she has been a member of.

Yasmine was very quiet throughout the focus group, with only a few contributions made to the discussion, despite my efforts to draw her in. The other playgroup members commented that this is not unusual, as Yasmine is naturally reserved. She did seem quite interested in what the other mothers were saying, however, and it is possible that she was part of the focus group to bolster her own social identity, and to give herself validation in her parenting. Alternatively, there are many other possible reasons to explain why Yasmine chose not to participate,

for example, she might have felt that she had nothing to add, or she may not be used to speaking in groups.

Summary of Participant Details

NAME	AGE	MARITAL STATUS	CHILDREN	WORK HISTORY	YEARS AT PLAYGROUP	ROLE AT PLAYGROUP
Cassie	31-35	Married	F 2 yrs	Hairdresser	2	Member
Chloe	31-35	Married	M 2 ½ yrs	Child care	1	Member
Debbie	31-35	Married	F 5 ½ yrs M 3 ½ yrs M 1 yr	Office assistant	5 ½	Secretary
Ella	26-30	De Facto	F 3yrs M 1 mth	Function co-ordinator	2	Member
Julie	31-35	Married	M 2 yrs M 2 yrs	DCD	1 ½	Member
Kelly	41-45	Married	M 3 yrs F 1 yr	Lab technician	2	President
Kendra	36-40	Married	M 2 yrs	Law	2	Member
Leonie	36-40	Married	F 6 yrs M 4 yrs M 1 yr	Bookkeeper	5	Member
Mandy	36-40	Married	F 9 yrs M 7 yrs F 7 yrs F 3 ½ yrs	Computer operator	9	Treasurer
Megan	36-40	Married	F 4 ½ yrs M 3 yrs	Hairdresser	1 ½	Member
Melanie	31-35	Married	F 6 ½ yrs M 3 ½ yrs	Deli assistant	4	Member
Meredith	31-35	De Facto	M 8 yrs M 2 yrs	Cleaner	½	Member
Naomi	31-35	Married	F 3 yrs M 1 ½ yrs	Human resources	3	President
Paula	36-40	De Facto	M 11 yrs M 8 yrs M 4 ½ yrs	Business owner	9 ½	Committee
Peyton	26-30	Married	F 2 yrs	Secretary	2	Member
Renee	26-30	Married	F 2 yrs	Swimming teacher	1 ½	Member
Stella	36-40	Married	M 2 yrs	Accountant	2	Leader
Stephanie	36-40	Married	M 9 yrs M 7 yrs F 3 yrs M 2 yrs	Admin officer	8 ½	Treasurer
Susan	31-35	Married	M 3 yrs F 8 mths	Nutritionist	2	Treasurer
Vicky	31-35	Married	M 5 yrs F 3 yrs M 1 yr	Nurse	5	Registrar
Yasmine	31-35	De Facto	F 6 ½ yrs F 3 ½ yrs	Administrator	6 ½	Member

Appendix B

One-on-one Interview Agenda

Introduction

- ☐ Consent form signed
- ☐ Purpose of research – interested in views and experiences of playgroup

General

- ☐ Length of time at playgroup
- ☐ Why joined initially?
- ☐ Typical day – when you go to playgroup and when you don't

Support

- ☐ Depth of support from family and friends
- ☐ How do they support?
- ☐ Different kinds of support

Parent Education

- ☐ Experiences and perceptions prior to becoming a parent
- ☐ How have these changed and why?
- ☐ How do people know how to parent?
- ☐ Advice – where from?

Expectations

- ☐ How has parenting been for them?
- ☐ Community expectations and where do they come from?

Playgroup

- ☐ Why continued to go to playgroup?
- ☐ Impact on parenting

Demographics

- ☐ Ethnicity
- ☐ Postcode, length of time at postcode and residence, mobility?
- ☐ Marital status
- ☐ Who lives in the household, ages of children?
- ☐ Age (U20/21-25/26-30/31-35/36-40/41-45/46-50/A50)

Anything we haven't covered?

- ☐ May need a second interview, would that be okay?

Thank you for your time

Appendix C

Letter Sent by Playgroup WA (Inc) to Playgroups Requesting Interview Participants
[Date]

Dear Playgroup President,

I am currently completing my Master of Psychology (Community Psychology) degree at Edith Cowan University. As part of this degree, I am writing a thesis about playgroup, specifically why some people choose to attend playgroup and why others do not. The university's Faculty of Community Services, Education and Social Sciences Ethics Committee have approved this study.

I am hoping to interview various people to hear their opinions on playgroup. For this study, I would like to speak to at least six different parents. I do not expect to speak to people only from your playgroup. This would not give the study a true perspective on the questions I am asking. If, however, I could visit your playgroup, and see if anyone is interested in participating, I would appreciate the opportunity to meet with you. The interview would take about 40 minutes, depending on how much information the participant wishes to share.

This study is seen as important, because it will investigate why people attend playgroup, what playgroups offer to people, and how playgroups can be made better for others to attend. If, however, your playgroup chooses not to participate in the study, that decision will have no effect at all on your playgroup or its members, or the services that are currently offered.

If your playgroup is interested in participating in this study, I can be contacted on the details below. My supervisor in this study, Dr Moira O'Connor, can be contacted at the university, on (08) 6304 xxxx. Alternatively, you may wish to discuss my research project with an independent person. If this is the case, please contact the Postgraduate Coordinator, Dr Deirdre Drake, on (08) 6304 xxxx. Thank you for considering my proposal.

Yours sincerely,

Bronwyn Harman,
Home: (08) 9272 xxxx
Mobile: 0412 06x xxx
Email:

Appendix D

Information Letter for One-on-one Interview Participants

[Date]

Dear Research Participant,

Thank you for agreeing to be part of my research project, which investigates why some people choose to attend playgroup and why others do not. Edith Cowan University's Faculty of Community Services, Education and Social Sciences Ethics Committee have approved this study. This letter gives you some information about the study.

Today I will be asking you to answer some questions, with as much detail as you wish to share. The interview should take about 40 minutes, depending on how much you wish to say. Please note that this interview will be tape recorded, unless you choose not to allow me to do so. The tape will be destroyed once I have transcribed it, and you will not be able to be identified from any information that I keep, including the thesis that results from this interview, which may be published at a later date.

You do not have to answer any questions that you choose not to answer. If you wish to discontinue this interview at any time you may do so. If you decide not to complete this interview, I respect your decision, and assure you that it will not have any affect on you at all. I can advise you of the outcome of the study, if you want me to do so.

If you have any queries about this study at any time, you can telephone me on (08) 9272 xxxx. Alternatively, you might wish to speak to my supervisor, Dr Moira O'Connor, on (08) 6304 xxxx. If you wish to speak to an independent person, please contact the Postgraduate Coordinator, Dr Deirdre Drake on (08) 6304 xxxx.

Thank you for participating in this study.

Bronwyn Harman

Appendix E

Consent Form for One-on-one Interview Participants

Dear Research Participant,

RE: CONSENT TO BE INTERVIEWED

Thank you for agreeing to be part of my research project, which investigates parenting and playgroup. Edith Cowan University's Faculty of Community Services, Education and Social Sciences Ethics Committee have approved this study.

I have given you an information sheet with more details about how this interview will be conducted, and whom you can contact if you have any questions. Before this interview can proceed, I must have your written consent to be interviewed. Please be reminded that if you wish to withdraw from the study at any time – even after signing this consent form – then you will be able to do so with no affect on you at all.

Please complete this section:

I do/do not understand my rights as a participant in this research project

I do/do not give my consent for this interview to take place

I do/do not give my consent for this interview to be tape recorded

Participant

Researcher (Bronwyn Harman)

____ / ____ / 2004

Thank you for participating in this research project.

Appendix F

Excerpt of a Transcribed and Coded One-on-one Interview (First Level of Analysis)

<i>Familial support</i>	<p><i>Do you have family and friends living nearby?</i></p> <p>Yes, my mother-in-law and father-in-law live 200 metres up the road on the same property, the same orchard.</p> <p><i>How do you feel about having them so close?</i></p>
<i>Benefits – extended family</i>	Oh, gosh. It depends which way you look at it. It's great to have the extended family. My mother actually lives 700 metres down the road the opposite way and she has nothing to do with the kids whatsoever. She's not interested at all. As a contrast, my son has just taken off with my mother-in-law, they spend a lot of time down there. I suffer quite badly from postnatal depression, with all three of my kids, it must just be a "me"
<i>Negative</i>	make-up thing. My first experience was a really horrid one, I can understand where that came from, the second two experiences haven't been too bad, but I felt myself falling into a hole regardless. So I go down to the shed at 10 and 3, which is morning and afternoon tea time, just so I'm speaking to someone other than small children, so they have, my kids have a lot to do with my husband's parents. And it's quite good, if I have an emergency, I can sort of say here you go, can you have such-and-such, and also if I'm going nuts and just need five minutes, they've been really great. On the other hand, my father-in-law often just walks in the door quite a lot without knocking [laughter]. I guess too the strain of living in someone else's pocket can be quite hard, and there's a cultural difference as well.
<i>Positive PND</i>	
<i>Painful experience</i>	
<i>Unsure</i>	
<i>Positive, supportive</i>	
<i>Negative, privacy issues</i>	
<i>Cultural diffs</i>	<p><i>What difference is that?</i></p> <p>They're Italian, from an Italian background. There was a bit of controversy when I first came in to the family, I'm not a Catholic, I raise my kids as Catholic, but I'm not Catholic, and the Italians are very strong Catholics, I guess just the cultural differences it's just been a bit hard to get along but that hasn't happened so much since I've had kids, the focus has changed a bit.</p>
<i>Family overrides cult diffs</i>	
<i>Support friend</i>	<p><i>What about friends?</i></p> <p>Umm, I picked up a very good friend at antenatal classes the first time around and she's fantastic. Um, I've had one other really good friend who I've just fallen out with. Um, yeah, I don't have a lot of really close friends, but those that I do I hold dear. I have a few extended arms lengths friends, and I have one very good friend in particular.</p>
<i>On the outer? Self isolating??</i>	
<i>Challenge</i>	<p><i>What are your thoughts on parenting? How has parenting been for you?</i></p> <p>A really big challenge, a huge challenge. Um I had my first child at 26, which I guess is not very young, my degree, and I've done Honours as well, so I guess I spent a lot of time</p>
<i>Previous experience, education</i>	

<p><i>Expectations, freedom vs responsibility???</i></p> <p><i>No parenting/child experience</i></p> <p><i>Expectations based on own exp.</i></p> <p><i>Analysis own parents – sounds painful childhood, painful memories</i></p> <p><i>Empathy</i></p> <p><i>Tries to be fair, child's perspective, tries to be demonstrative, even though she did not exp it herself</i></p> <p><i>Recognition not perfect, thinks about ways to improve</i></p>	<p>developing my career and then working and I guess I have always been a very regimented independent person, so while I wasn't naïve thinking it was going to be a walk in the park, I don't think I thought perhaps it was going to be quite as challenging as it was. I just wonder whether if when you're a younger mum maybe you have less expectations, therefore you expect less, whereas coming from my perspective you are used to freedom, and then comes parenting which is a complete lack of freedom. I guess it's more of a selfish aspect I guess, I'm used to being a bit selfish perhaps.</p> <p><i>What's your degree in, your background?</i></p> <p>I've got a business degree in agriculture.</p> <p><i>Did you have much experience before you became a parent with parenting or parenting styles?</i></p> <p>Next to none.</p> <p><i>So you came in with nothing?</i></p> <p>Nothing.</p> <p><i>But you had high expectations of what parenting would be?</i></p> <p>I guess, I've been raised very much you do as you're told, have good manners, a very much English-style totalitarian style of parenting, and I just assumed that that was what I would do. But it doesn't really work like that. They're challenging little creatures [laughter].</p> <p><i>So that whole perspective has changed?</i></p> <p>Ummm [long pause]</p> <p><i>Is this what you thought parenting was going to be like?</i></p> <p>Well, I try and stick to my ideals, but I guess it's easier sometimes to let things slide. Much easier. It's become a whole can of worms, because I guess once you become a parent you analyse what your relationship was like with your parents, and I know mine was very abrasive with my mother. There was so much expected of me, with very little reward in the way of love and nurturing on the other side. I think I've come to the conclusion it's not going to change, just deal with it, but my mum lost her mum when she was 10, and she's number five in line, so I just wonder how much love she got in that short ten years, but I find that I have expectations of my five year old daughter that are just way too high. I find myself saying things to her and expecting things of her, and then saying to myself hang on, she's only five, this is not healthy for me to be putting this pressure on her. And I have to stop and think some days and think I don't think I've given her a hug today, or I haven't told her I love her, or I haven't told her she's done something really well. I haven't done the Positive Parenting Program, but maybe I should go and do it, but it's just a time frame thing, but maybe I need to confront the fact that I'm not the world's most positive parent.</p>
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Excerpt of a Transcribed and Coded One-on-one Interview (Second Level of Analysis)

<i>Familial support</i> D	<i>Do you have family and friends living nearby?</i> Yes, my mother-in-law and father-in-law live 200 metres up the road on the same property, the same orchard.
<i>Benefits – extended family</i> Negative A	<i>How do you feel about having them so close?</i> Oh, gosh. It depends which way you look at it. It's great to have the extended family. My mother actually lives 700 metres down the road the opposite way and she has nothing to do with the kids whatsoever. She's not interested at all. As a contrast, my son has just taken off with my mother-in-law, they spend a lot of time down there. I suffer quite badly from postnatal depression, with all three of my kids, it must just be a "me" make-up thing. My first experience was a really horrid one, I can understand where that came from, the second two experiences haven't been too bad, but I felt myself falling into a hole regardless. So I go down to the shed at 10 and 3, which is morning and afternoon tea time, just so I'm speaking to someone other than small children, so they have, my kids have a lot to do with my husband's parents. And it's quite good, if I have an emergency, I can sort of say here you go, can you have such-and-such, and also if I'm going nuts and just need five minutes, they've been really great. On the other hand, my father-in-law often just walks in the door quite a lot without knocking [laughter]. I guess too the strain of living in someone else's pocket can be quite hard, and there's a cultural difference as well.
<i>Positive</i> PND	
<i>Painful experience</i>	
<i>Unsure</i>	
<i>Positive, supportive</i> D	
<i>Negative, privacy issues</i>	
<i>Cultural diffs</i>	<i>What difference is that?</i> They're Italian, from an Italian background. There was a bit of controversy when I first came in to the family, I'm not a Catholic, I raise my kids as Catholic, but I'm not Catholic, and the Italians are very strong Catholics, I guess just the cultural differences it's just been a bit hard to get along but that hasn't happened so much since I've had kids, the focus has changed a bit.
<i>Family overrides cult diffs</i>	
<i>Support friend</i> E	<i>What about friends?</i> Umm, I picked up a very good friend at antenatal classes the first time around and she's fantastic. Um, I've had one other really good friend who I've just fallen out with. Um, yeah, I don't have a lot of really close friends, but those that I do I hold dear. I have a few extended arms lengths friends, and I have one very good friend in particular.
<i>On the outer? A</i> <i>Self isolating??</i>	<i>What are your thoughts on parenting? How has parenting been for you?</i> A really big challenge, a huge challenge. Um I had my first child at 26, which I guess is not very young, my degree, and I've done Honours as well, so I guess I spent a lot of time
<i>Challenge</i>	
<i>Previous experience, education i</i>	

<p><i>Expectations, freedom vs responsibility???</i> i vi</p>	<p>developing my career and then working and I guess I have always been a very regimented independent person, so while I wasn't naïve thinking it was going to be a walk in the park, I don't think I thought perhaps it was going to be quite as challenging as it was. I just wonder whether if when you're a younger mum maybe you have less expectations, therefore you expect less, whereas coming from my perspective you are used to freedom, and then comes parenting which is a complete lack of freedom. I guess it's more of a selfish aspect I guess, I'm used to being a bit selfish perhaps.</p>
<p><i>No parenting/child experience</i></p>	<p><i>What's your degree in, your background?</i> I've got a business degree in agriculture. <i>Did you have much experience before you became a parent with parenting or parenting styles?</i> Next to none.</p>
<p><i>Expectations based on own exp.</i> ii iv</p>	<p><i>So you came in with nothing?</i> Nothing. <i>But you had high expectations of what parenting would be?</i> I guess, I've been raised very much you do as you're told, have good manners, a very much English-style totalitarian style of parenting, and I just assumed that that was what I would do. But it doesn't really work like that. They're challenging little creatures [laughter].</p>
<p><i>Analysis own parents – sounds painful childhood, painful memories</i> ii <i>Empathy</i></p>	<p><i>So that whole perspective has changed?</i> Ummm [long pause] <i>Is this what you thought parenting was going to be like?</i> Well, I try and stick to my ideals, but I guess it's easier sometimes to let things slide. Much easier. It's become a whole can of worms, because I guess once you become a parent you analyse what your relationship was like with your parents, and I know mine was very abrasive with my mother. There was so much expected of me, with very little reward in the way of love and nurturing on the other side. I think I've come to the conclusion it's not going to change, just deal with it, but my mum lost her mum when she was 10, and she's number five in line, so I just wonder how much love she got in that short ten years, but I find that I have expectations of my five year old daughter that are just way too high. I find myself saying things to her and expecting things of her, and then saying to myself hang on, she's only five, this is not healthy for me to be putting this pressure on her. And I have to stop and think some days and think I don't think I've given her a hug today, or I haven't told her I love her, or I haven't told her she's done something really well. I haven't done the Positive Parenting Program, but maybe I should go and do it, but it's just a time frame thing, but maybe I need to confront the fact that I'm not the world's most positive parent.</p>
<p><i>Tries to be fair, child's perspective, tries to be demonstrative, even though she did not exp it herself</i> <i>Recognition not perfect, thinks about ways to improve</i> a d</p>	<p></p>

Excerpt of a Transcribed and Coded One-on-one Interview (Third Level of Analysis)

<i>Familial support</i> D (1)	<i>Do you have family and friends living nearby?</i> Yes, my mother-in-law and father-in-law live 200 metres up the road on the same property, the same orchard.
<i>Benefits – extended family</i> Negative A (1)	<i>How do you feel about having them so close?</i> Oh, gosh. It depends which way you look at it. It's great to have the extended family. My mother actually lives 700 metres down the road the opposite way and she has nothing to do with the kids whatsoever. She's not interested at all. As a contrast, my son has just taken off with my mother-in-law, they spend a lot of time down there. I suffer quite badly from postnatal depression, with all three of my kids, it must just be a "me" make-up thing. My first experience was a really horrid one, I can understand where that came from, the second two experiences haven't been too bad, but I felt myself falling into a hole regardless. So I go down to the shed at 10 and 3, which is morning and afternoon tea time, just so I'm speaking to someone other than small children, so they have, my kids have a lot to do with my husband's parents. And it's quite good, if I have an emergency, I can sort of say here you go, can you have such-and-such, and also if I'm going nuts and just need five minutes, they've been really great. On the other hand, my father-in-law often just walks in the door quite a lot without knocking [laughter]. I guess too the strain of living in someone else's pocket can be quite hard, and there's a cultural difference as well.
<i>Positive</i> PND	
<i>Painful experience</i>	
<i>Unsure</i>	
<i>Positive, supportive</i> D (1)	
<i>Negative, privacy issues</i>	
<i>Cultural diffs</i>	<i>What difference is that?</i> They're Italian, from an Italian background. There was a bit of controversy when I first came in to the family, I'm not a Catholic, I raise my kids as Catholic, but I'm not Catholic, and the Italians are very strong Catholics, I guess just the cultural differences it's just been a bit hard to get along but that hasn't happened so much since I've had kids, the focus has changed a bit.
<i>Family overrides cult diffs</i>	
<i>Support friend</i> E (1)	<i>What about friends?</i> Umm, I picked up a very good friend at antenatal classes the first time around and she's fantastic. Um, I've had one other really good friend who I've just fallen out with. Um, yeah, I don't have a lot of really close friends, but those that I do I hold dear. I have a few extended arms lengths friends, and I have one very good friend in particular.
<i>On the outer? A (1) Self isolating??</i>	
<i>Challenge</i>	<i>What are your thoughts on parenting? How has parenting been for you?</i> A really big challenge, a huge challenge. Um I had my first child at 26, which I guess is not very young, my degree, and I've done Honours as well, so I guess I spent a lot of time
<i>Previous experience, education i (3)</i>	

<p><i>Expectations, freedom vs responsibility???</i> i vi (3)</p>	<p>developing my career and then working and I guess I have always been a very regimented independent person, so while I wasn't naïve thinking it was going to be a walk in the park, I don't think I thought perhaps it was going to be quite as challenging as it was. I just wonder whether if when you're a younger mum maybe you have less expectations, therefore you expect less, whereas coming from my perspective you are used to freedom, and then comes parenting which is a complete lack of freedom. I guess it's more of a selfish aspect I guess, I'm used to being a bit selfish perhaps.</p>
<p>No parenting/child experience</p>	<p><i>What's your degree in, your background?</i> I've got a business degree in agriculture. <i>Did you have much experience before you became a parent with parenting or parenting styles?</i> Next to none. <i>So you came in with nothing?</i></p>
<p><i>Expectations based on own exp.</i> ii (3) iv (3)</p>	<p>Nothing. <i>But you had high expectations of what parenting would be?</i> I guess, I've been raised very much you do as you're told, have good manners, a very much English-style totalitarian style of parenting, and I just assumed that that was what I would do. But it doesn't really work like that. They're challenging little creatures [laughter]. <i>So that whole perspective has changed?</i> Ummm [long pause]</p>
<p><i>Analysis own parents – sounds painful childhood, painful memories</i> ii (3) <i>Empathy</i></p>	<p><i>Is this what you thought parenting was going to be like?</i> Well, I try and stick to my ideals, but I guess it's easier sometimes to let things slide. Much easier. It's become a whole can of worms, because I guess once you become a parent you analyse what your relationship was like with your parents, and I know mine was very abrasive with my mother. There was so much expected of me, with very little reward in the way of love and nurturing on the other side. I think I've come to the conclusion it's not going to change, just deal with it, but my mum lost her mum when she was 10, and she's number five in line, so I just wonder how much love she got in that short ten years, but I find that I have expectations of my five year old daughter that are just way too high. I find myself saying things to her and expecting things of her, and then saying to myself hang on, she's only five, this is not healthy for me to be putting this pressure on her. And I have to stop and think some days and think I don't think I've given her a hug today, or I haven't told her I love her, or I haven't told her she's done something really well. I haven't done the Positive Parenting Program, but maybe I should go and do it, but it's just a time frame thing, but maybe I need to confront the fact that I'm not the world's most positive parent.</p>
<p><i>Tries to be fair, child's perspective, tries to be demonstrative, even though she did not exp it herself</i> <i>Recognition not perfect, thinks about ways to improve</i> a d (2)</p>	<p></p>

Examples of Codes from all Interviews (Fourth Level of Analysis)

1. Support (Overarching Theme)

- A. Perceived lack of support from family and/or friends
- B. Needs support because no friends/family close by
- C. Needs support because of some other reason
- D. I get support from family
- E. I get support from friends or elsewhere
- F. Playgroup provides support to others as well
- G. I feel isolated from others

Examples of Grouped Codes from all Interviews (Fifth Level of Analysis)

- I do not get enough support from family and/or friends and I feel isolated (A, G) - *isolation*
- I need more support than I am getting, or would get had I not had other contacts (B, C) – *lack of support*
- I do get support, and so do other people I know, from family, friends, playgroup or elsewhere (D, E, F) – *positive experiences of support*

Appendix G
Focus Group Interview Agenda

Introduce yourself and the purpose of the research. Ask participants to sign the consent form, and ensure each has an information letter. If all have consented to taping, turn on the tape recorder.

1. I'm interested to hear about your experiences as a parent.
2. How would you describe yourself prior to becoming a parent?
3. I'm interested in hearing about whether you always expected to have children.
4. How do feel about support as a parent?
5. Please tell me about some of the expectations placed on you as a parent.
6. Who are you? Describe yourself to me.
7. Let's talk about the perfect mother, or the "good mother".
8. How does playgroup relate to your experiences as a mother?

Appendix H

Letters Sent by Playgroup WA (Inc) to Playgroups Requesting Focus Group
Participants

[Date]

Dear Playgroup President,

I am currently completing my Doctor of Psychology (Community Psychology) degree at Edith Cowan University. As part of this degree, I am writing a thesis about motherhood and playgroup, specifically how playgroup does or does not support mothers in their parenting role, titled "The 'Good Mother Syndrome' and Playgroup: The Lived Experience of a Group of Mothers". Edith Cowan University's Human Research Ethics Committee has approved this study.

For this study, I will be conducting focus groups to hear people's opinions on playgroup. I would like to conduct at least two different focus groups – not necessarily both from your playgroup. One focus group would contain first time mothers of children aged less than one year. The second focus group would consist of parents of more than one child (from more than one birth), aged less than 5 years. The focus groups would work best if they consisted of about 10 members, but I understand that it might not be possible to have all participants come from the same playgroup. If your playgroup members are interested in participating in a focus group, I would appreciate the opportunity to meet with you. The focus group would take about 40 minutes, depending on how much information the participants wish to share.

This letter has been sent to you at random by Playgroup WA (Inc) on my behalf, and I do not know which playgroups have received the letter. I have enclosed an information letter that gives details of the study, which I am requesting you distribute to your members so that they can decide whether they wish to participate or not. Interested persons should contact me on the details below (which are also included on the information letter). If there are not enough copies of the information letter, please feel free to photocopy it, or I can provide more copies if you request them.

This study is seen as important, because it will investigate the ideals of motherhood, what playgroups offer to mothers, and how playgroups can be made better for others to attend. If, however, your playgroup chooses not to participate in the study, that decision will have no effect at all on your playgroup or its members, or the services that are currently offered.

If you or your playgroup members have any queries about this study, I can be contacted on the details below. My supervisor in this study, Dr Moira O'Connor, can be contacted at the university, on (08) 6304 xxxx. Alternatively, you may wish to discuss my research project with an independent person. If this is the case, please contact the Postgraduate Coordinator, Dr Deirdre Drake, on (08) 6304 xxxx. Thank you for considering my proposal.

Yours sincerely,

Bronwyn Harman,
Home: (08) 9272 xxxx
Mobile: 0412 06x xxx
Email:

[Date]

Dear Playgroup Member,

I am currently completing a Doctor of Psychology (Community Psychology) at Edith Cowan University. As part of this degree, I am writing a thesis about motherhood and playgroup, specifically how playgroup does or does not support mothers in their parenting role, titled "The 'Good Mother Syndrome' and Playgroup: The Lived Experience of a Group of Mothers". Edith Cowan University's Human Research Ethics Committee has approved this study. This letter gives you some information about the study, so that you can decide whether you wish to participate or not.

Your playgroup President was sent these letters for distribution to you and other members of the playgroup. Your playgroup was selected randomly by Playgroup WA (Inc), and, unless a member of your playgroup contacts me, I will not know which playgroups in Western Australia have received this letter.

If you choose to be part of this study, I will be asking you to participate in a focus group, giving as much detail as you wish to share. The focus group should take about 40 minutes, depending on how much the group wishes to say, and will be held at a time and place convenient to you. Light refreshments will be provided.

Please note that this focus group will be tape recorded, unless you (or another member of the group) choose not to allow me to do so. The tape will be destroyed once I have transcribed it, and you will not be able to be identified from any information that I keep, including the thesis that results from this focus group, which may be published at a later date. However, I will be the only person who has access to the tapes before they are destroyed, and, apart from my supervisors (Dr Moira O'Connor and Dr Margaret Sims), I will also be the only person who reads the transcripts from the focus group, which will not identify you in any way. After the research project is completed, all transcripts will be destroyed.

You do not have to answer any questions that you choose not to answer. If you wish to discontinue participation in this focus group at any time you may do so. If you decide not to complete this focus group interview, I respect your decision, and assure you that it will not have any affect on you at all. I can advise you of the outcome of the study, if you want me to do so. I hope that if you participate you will have the opportunity to network with other mothers in your area, and that you will be able to share your parenting experiences. Should participation in this focus group cause distress in any way, you may leave at any time, and I will also have a list of appropriate counsellors available should you require it.

If you choose to participate in this study, I will contact you with details about the focus group (date, time and place). Before the focus group begins, you will be asked to sign a consent form, which allows me to interview you as part of the focus group. It is important that you understand that you may withdraw from the study at any time, even if you have attended the focus group and/or signed the consent form, and that such withdrawal will not affect you at all.

If you choose to participate in the study, or if you have any queries about this study at any time, you can telephone me on the details below. Alternatively, you might wish to speak to

my supervisor, Dr Moira O'Connor, on (08) 6304 xxxx. If you have any concerns or complaints about the research project and wish to speak to an independent person, please contact the Research Ethics Officer, Edith Cowan University, 100 Joondalup Drive, Joondalup WA 6027, telephone 63042170, or email research.ethics@ecu.edu.au.

Thank you for considering participation in this study.

Bronwyn Harman
Home: (08)9272xxxx
Mobile: 041206xxxx
Email:

Appendix I

Information Letter for Focus Group Interview Participants

[Date]

Dear Research Participant,

Thank you for agreeing to be part of my research project, which investigates parenting and playgroup. Edith Cowan University's Faculty of Community Services, Education and Social Sciences Ethics Committee have approved this study. This letter gives you some information about the study.

Today I will be asking you to participate in a focus group, giving as much detail as you wish to share. The focus group should take about 40 minutes, depending on how much the group wishes to say. Please note that this focus group will be tape recorded, unless you (or another member of the group) choose not to allow me to do so. The tape will be destroyed once I have transcribed it, and you will not be able to be identified from any information that I keep, including the thesis that results from this focus group, which may be published at a later date.

You do not have to answer any questions that you choose not to answer. If you wish to discontinue participation in this focus group at any time you may do so. If you decide not to complete this focus group interview, I respect your decision, and assure you that it will not have any affect on you at all. I can advise you of the outcome of the study, if you want me to do so.

If you have any queries about this study at any time, you can telephone me on (08) 9272 xxxx. Alternatively, you might wish to speak to my supervisor, Dr Moira O'Connor, on (08) 6304 xxxx. If you wish to speak to an independent person, please contact the Postgraduate Coordinator, Dr Deirdre Drake on (08) 6304 xxxx.

Thank you for participating in this study.

Bronwyn Harman

Appendix J

Consent Form for Focus Group Interview Participants

Dear Research Participant,

RE: CONSENT TO BE INTERVIEWED FOR THE DOCTOR OF PSYCHOLOGY (COMMUNITY PSYCHOLOGY) RESEARCH THESIS, TITLED "THE 'GOOD MOTHER SYNDROME' AND PLAYGROUP: THE LIVED EXPERIENCE OF A GROUP OF MOTHERS".

Thank you for agreeing to be part of my research project, which investigates parenting and playgroup. Edith Cowan University's Human Research Ethics Committee have approved this study.

I have given you an information sheet with more details about how this focus group will be conducted, and whom you can contact if you have any questions. Before this focus group can proceed, I must have your written consent to participate. Please be reminded that if you wish to withdraw from the study at any time – even after signing this consent form – then you will be able to do so with no affect on you at all. If you wish to withdraw, you do not have to explain why, you only need to contact Bronwyn Harman or Dr Moira O'Connor (details below) to advise that you have chosen to withdraw.

If you choose to sign this consent form, you are agreeing that you:

- Have read and understood the information provided;
- Have been given the opportunity to ask questions, and had those questions answered to your satisfaction;
- Are aware that any additional questions can be answered by the research team;
- Understand your rights as a participant in this research project;
- Understand the confidentiality of the information provided;
- Understand that your identity will not be disclosed without your direct written consent;
- Understand that the information provided will only be used for the thesis (which may be published at a later date), as outlined in the information letter provided;
- Are participating in this research freely;
- Give your consent to participate in this focus group; and,
- Give your consent for this interview to be tape recorded.

Participant

Researcher (Bronwyn Harman)

____ / ____ / 2006

Thank you for participating in this research project. A signed copy of this consent form can be provided to you on request.

Contact details:

Researcher: Bronwyn Harman 9272 xxxx

Supervisor: Dr Moira O'Connor 6304 xxxx

Appendix K

Letter to Participants Requesting Feedback on Transcripts

[Date]

Dear Research Participant,

Recently you were interviewed as part of my research project, which investigates why some people choose to attend playgroup and why others do not. Thank you for agreeing to be interviewed, as it is an important basis of my research.

Please find enclosed a copy of what you said in the interview. This is not a word for word transcript of the interview, but rather a "clean" copy, or a summary of your most important points. You will notice that all identifying details have been either changed or omitted.

As this is the copy that might be included as an Appendix in my thesis, it is important that you agree that this is what was said in the interview. If you disagree that you said anything that is written, you are entitled to have it removed, or, if you would now like anything added, you can do so. Please use a red pen to indicate any changes you wish to make (and please also print your changes). You can then post this to me at [address], or I can collect it from you if that is more convenient. If I have not received your changes on or before 30th April 2004, I will assume that what I have sent you is a correct copy.

Please be reminded that if you have any queries about this study at any time, you can telephone me on (08) 9272 xxxx. Alternatively, you might wish to speak to my supervisor, Dr Moira O'Connor, on (08) 6304 xxxx. If you wish to speak to an independent person, please contact the Postgraduate Coordinator, Dr Deirdre Drake on (08) 6304 xxxx.

Thank you once again for participating in this study.

Bronwyn Harman

Appendix L

Excerpt from Researcher Notes Regarding an Interview

Participant Code: 220304	
Setting, suburb etc	Quite an outer suburb, Hills area; road twisting towards house, somewhat remote from other houses – maybe a short walk away, not a “just pop next door”. Physical isolation – psychological isolation? Not clear
The house – physically	Very neat, traditional country style, lots of wood, china, doilies, tapestry. Sprawling farm like area around home, lots of sheds, tractors, 4WDs, other farm equipment.
The house – atmosphere	Comfortable, no tension. Was baking cakes to enter in local competition, smell of home cooking through house – timely? Felt at ease
Participant – initial thoughts	Seems wary. Might be unsure what I’m there for, am I here to judge? Very pleasant, very polite, but I see caution in her eyes – how much should she disclose??? Demand characteristics?
Participant – during interview	Careful at first, does not take long to relax. Calls a spade a spade. Brings up memories that obviously cut deep, painful. I think she wishes things were different with her own mother but she recognises it’s not. Determined not to repeat parenting style, but admits she has to work at it. Children are obvious priority, trying really hard to do the juggling thing successfully for all.
Participant – end of interview	Seems more relaxed, I think the interview was cathartic. Allowed to explore deep issues with someone she doesn’t know but trusts to listen. Body language changed through interview, initially kept table as barrier, gradually moved chair around so table not between us, and facing more openly. Wariness left her eyes, replaced with warmth. Comment at end – “is that it?” – incredulous almost.
Later contact	Happy to hear from me, inquired after study’s progress. Answered further questions/clarified willingly. Did not request changes to transcript.

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