ONE

The Transition to Parenthood

The transition to parenthood is not a new topic for research and discussion. In fact, this topic has been studied at some depth for more than half a century, by researchers interested in life-span development and in the structure and functions of the family. Moreover, it has undoubtedly been discussed informally throughout most of the history of the human race, as young people have wondered about the impact of this event and their elders have tried to share their own experience and advice. In this chapter, we trace the development of studies in this area, and present the main findings that these research projects have generated.
WHY STUDY THE TRANSITION TO PARENTHOOD?

Perhaps the first question that we should consider is why the transition to parenthood arouses so much interest. At least two broad reasons can be suggested. First, parenthood is a topic that is of direct interest to most people. As children, we experience parental relationships on a personal and ongoing basis, and as adults, we may recognize that this experience plays a formative role in the way we develop and function. Further, the majority of people have at least one child during their life span, and almost everyone has seen close friends or family members dealing with pregnancy and new parenthood. This almost universal experience of parenthood applies across cultures and across eras, despite the fact that more adults in western societies are now remaining single, choosing not to become parents, or having only one or two children, than in the past.

Survey studies show that most young people still envisage their future as including the traditional aspects of family life, including a wedding, honeymoon, and children (e.g., Kilmartin, 2000), and still see marriage as playing an important role in fulfilling personal needs for companionship and emotional security (Barich & Bielby, 1996). Similarly, recent British survey data show that when people are asked about the “important events” that have happened to them during the last year, almost half of the events mentioned involve the family unit; in addition, of these family-related events, pregnancy and birth are mentioned more often than any other type of event (Newman & Smith, 1997).

In fact, the tendency for adults to show an interest in babies and young children may be “hardwired,” as part of our evolutionary heritage. After all, our survival as a species depends, at one level, on our urge to reproduce; further, both couple relationships and parent-child relationships are crucial for our reproductive success (Buss, 1994). According to many researchers, the relevance of evolutionary principles to parenthood is not confined to the acts of conceiving, bearing, and giving birth to children. Rather, because humans take many years to reach maturity, it is important that parents be willing to nurture and care for their offspring during these formative years. Parents’ involvement in protecting and teaching their children helps to ensure the
safety of the offspring, and the passing on of their genetic heritage (Bell & Richard, 2000). In other words, from an evolutionary perspective, it is important that adults produce children, and that they are prepared to invest time, energy, and material resources to foster their development.

The second reason for the interest in the transition to parenthood is slightly more academic, although the relevance to individuals and families is very clear. This reason centers on the remarkable changes that are implicit in the arrival of a new infant. Prior to first-time parenthood, the “family” (or at least the “nuclear family”) simply consists of the couple. With the arrival of the first baby, the family becomes much more complex: There are now three dyadic relationships, instead of one. Further, as we have already mentioned, the new arrival is relatively helpless, and dependent on the parents for care and protection. Hence, new parents have to respond to their infants’ needs and signals, and the responses are quite far-reaching. For instance, new mothers and fathers generally experience strong emotional responses to their babies (although these responses vary from one parent to another, and from one point in time to another). In addition, these emotional responses of love and concern (and, at times, frustration), are interwoven with the practical aspects of parenting: Many new tasks have to be tackled in households with young babies.

In short, the role of parent is a demanding one; moreover, because it is acquired fairly abruptly, there is often a sense of anxiety and inadequate preparation (Miller & Sollie, 1980). Given the pressures and demands that come with parenthood, it seems only natural that the relationship between the mother and the father will undergo some changes. In fact, these changes are likely to be quite diverse, and to involve both rewards and stresses. Hence, these shifts are of interest to researchers and practitioners who are interested in couple and family relationships, as well as to prospective parents.

PLANNING FOR PARENTOOD

As we will see shortly, researchers who want to document the experience of new parenthood generally study individuals or couples who have recently become parents, or those who are expecting their first
child when they are recruited for the study. However, in a very real sense, the transition to parenthood begins for many couples long before these events. That is, the transition may begin with a prior period of planning and decision making.

To Have or Not to Have?

Of course, pregnancy is not always the result of planning, and it may seldom occur at the exact time that the parents might hope. When children are born into a stable relationship, however, the partners are likely to have put a considerable amount of time and effort into planning for parenthood. Many couples recognize the importance of joint decision making in this area, and opt for direct discussion and negotiation of their plans; that is, should they have children at all and, if so, when would be the “right” time?

At the start of this chapter, we noted that most young people see having children as part of their future, but that more are deciding to remain childless than in the past. Together, these two facts highlight the importance of how people see both the rewards and the costs associated with parenting.

Researchers interested in these issues have developed questionnaires designed to measure various aspects of attitudes to parenting: how strongly individuals desire offspring, how well they think they can relate to young children, how much satisfaction they think they would derive from caring for infants, and how much aggravation they might experience in relation to child-rearing (e.g., Rholes, Simpson, Blakely, Lanigan, & Allen, 1997). These studies confirm the idea that people differ quite widely in their desire for children, and in their expectations of the rewards and costs of having children.

Costs of Parenting. The perceived costs (or “barriers”) of parenting can be categorized into a number of broad areas.

- Ability to relate: Some people report concerns about how well they would relate to offspring. For example, they may feel “uncomfortable” in the presence of young children, or worry that they could not become emotionally attached to them.
Responsibility: Other people express concerns about the amount of work and responsibility involved in child-rearing, and the emotional strain associated with ensuring the child's health, safety, and general well-being.

Lifestyle: The restrictions that parenting places on social activities and shared couple activities are salient to many people. Similarly, some individuals fear that parenthood will interfere with their pursuit of important individual achievements, such as meeting educational, financial, and career goals.

Effects on marriage: Another concern expressed by some people is that children will put a lot of strain on their marriage, by placing extra demands on partners' time, attention, and energy.

Rewards of Parenting. On the other hand, people also perceive many rewards associated with parenting, and give many reasons for wanting to have children. In fact, according to Clements and Markman (1996, p. 292), there are “almost as many reasons for having children as there are couples who have them”. Individuals may not always be clearly aware of these reasons. It has been argued, for example, that “unplanned” pregnancy, stemming from a careless use of contraception, sometimes reflects an unconscious desire to have children (Harris & Campbell, 1999). Although some individuals may not be clearly aware of their motivations for having children, others are able to provide one or more reasons for their decision. Again, these reasons can be classified into several broad areas.

Biological need: Having children can be seen as the fulfillment of strong biological needs to procreate. As mentioned earlier, the urge to reproduce is crucial to the survival of the species; infants are cute and cuddly, and tend to trigger responses of love and care in prospective parents.

Emotional rewards: Some individuals claim that they want to have children because of the affection and companionship they will provide. In addition, they may anticipate parenthood as involving both fun and challenge, or as giving them a sense of personal achievement.

A symbol of love: Others see parenthood as a way of partners' expressing their love and affection for each other, or as a symbol of
that love. They may also believe that having children will keep them close, and promote cohesion and stability in the relationship.

- A sense of continuity: Some people see having children as a way of extending their sphere of influence; that is, they express a desire to “live on” through their children and grandchildren. Similarly, they may report a desire to carry on the “family name,” or perpetuate the “family line.”

- Improving on experience: Another reason some individuals give for having children is that they want to “do things better” than their own parents did; put another way, they want to show that they will not make the same mistakes.

- Social pressure: For some people, parenthood may be a response, in part, to the expectations of others. These expectations may come from society at large, from friends, or from family members who exert pressure on couples to produce grandchildren.

- Overcoming problems: Finally, some people may see pregnancy as a way of cementing a troubled relationship, or of overcoming feelings of loneliness or being unloved. It is important to note that these expectations are likely to be unrealistic, however; in fact, the demands of new parenthood are likely to increase the problems of those who are already struggling in their relationships or their personal lives.

In short, despite the costs associated with child-rearing, people offer many reasons for wanting to have children. In cases where parenthood is jointly planned, questions also arise about how long couples should wait before they embark on their first pregnancy.

**When Is the Right Time?**

First-time parenthood occurs at very different ages and stages of the life cycle. Nevertheless, there is a clear demographic trend in western societies whereby age at first birth is increasing, with many couples choosing to postpone having children until they are in their 30s and beyond. This is an interesting trend, because it means that many couples are tending to ignore their “biological clocks”, and trying to conceive beyond their most fertile age.
How couples decide when to have their first child is not well understood. Demographers have put a lot of effort into studying how the timing of the first birth relates to the social characteristics of one partner. In most cases, the focus of these studies has been on the characteristics of the woman; for instance, researchers might ask how the timing of parenthood is related to the wife’s work patterns or level of education. The focus on areas such as education and occupation seems well justified: Women who emphasize achievement in these areas are likely to delay their first pregnancy, and conversely, pregnancy and parenthood tend to interrupt activity in these areas. However, a limitation of many of these studies is that they have ignored the joint decision-making processes that take place in couple relationships. It is only fairly recently that these processes have been examined.

The results emerging from these studies of couple relationships are quite complex, and suggest that the decision-making process may work differently in different cultures. For example, in cultures with a fairly traditional family orientation, characteristics of the woman seem to be the most important factors influencing the timing of the first pregnancy. This is not surprising, because in these cultures, parenting tends to be seen as primarily the province of women. In contrast, in cultures that tend to emphasize the equal roles of men and women, the characteristics of both partners seem to be important to the timing of parenthood, presumably because both partners have substantial input into family-related decisions (Corijn, Liefbroer, & de Jong Gierveld, 1996).

**EARLY STUDIES OF THE TRANSITION TO PARENTHOOD: A TIME OF CRISIS**

In contrast to the relatively limited research on how couples plan parenthood, many studies have attempted to show how the birth of the first child affects new parents. In trying to make sense of this large body of work, it becomes clear that the research methods used and the conclusions reached have tended to shift over time. We will start by describing the early studies conducted in this area, and go on to explain why certain limitations of these studies prompted calls for more sophisticated kinds of research.
For roughly 50 years, researchers have been investigating the effects of new parenthood. In an influential book published in 1949, Hill developed a model of family stress and crisis. In this book, he suggested that in some cases, parenthood was so stressful and required such a drastic reorganization of roles and interaction patterns that it could precipitate a crisis for spouses. The idea that parenthood represents a crisis point in individuals’ and couples’ lives persisted over the next couple of decades, as reflected in the classic studies of that era. These studies were of two main types: clinical studies and retrospective interviews.

Clinical Studies

The early clinical studies of parenthood came primarily from within the psychoanalytic tradition (e.g., Benedek, 1959; Bibring, Dwyer, Huntington, & Valentine, 1961; Caplan, 1957). These studies were based on clinicians’ evaluations of expectant women or new mothers, and their husbands, and tended to focus on the internal conflicts facing these individuals.

Although this approach can provide some insights into the issues that trouble new or prospective parents, the samples studied were often quite small. More important, the samples were certainly not typical of new parents. Rather, they consisted of women and men who had been in therapy for some time, or who presented with significant emotional problems that had begun during pregnancy or shortly after the birth of the baby. Because the samples were so atypical, the findings are unlikely to apply outside of the clinical setting.

Interviews “Looking Back”

The second type of study within the “crisis” viewpoint used somewhat larger samples, and involved interviewing parents about their recollections of the arrival of their first child. For example, LeMasters (1957) interviewed 48 couples, and concluded that the transition to parenthood had been a crisis for the vast majority of them. A few years later, Dyer (1963) conducted a similar study and reached similar conclusions, although he advanced previous findings by noting a link between the
state of the marriage before the birth and the amount of crisis experienced.

Again, however, studies of this type suffered from severe limitations. Not only were the interviews retrospective (i.e., looking back on events that had occurred earlier), in many cases, they took place several years after the birth. Retrospective reports of events are always potentially flawed, because they rely on people having accurate and complete memories of the events in question. As Grossman (1988, p. 89) has noted, however, retrospective reports are likely to be especially problematic in the case of new parenthood, given that the experience that people are asked to recall is “complicated, intense, and fatiguing.”

LATER STUDIES: IMPROVING RESEARCH METHODS

In another series of studies of the transition to parenthood, Hobbs (e.g., 1965, 1968) assessed parents when their babies were relatively young (between about one and eight months of age). He also used a more structured approach to assessment; namely, a checklist of specific problems or stresses that might be associated with new parenthood (e.g., interruption of routine habits, tiredness, and fatigue, etc.). Hobbs’s studies consistently suggested that although new parenthood is stressful, it does not involve high levels of crisis.

Why was Hobbs’s conclusion so different from that of the earlier researchers? The most likely explanation lies in the different methods used. It is almost inevitable that clinical studies will portray new parenthood as fraught with danger, because only those who experience it as traumatic will find their way into the samples. In terms of the interview studies, we have already suggested that people are unlikely to have complete and accurate memories of their past experiences of parenting. Rather, the things that come to mind some years later may be the most striking (and possibly the most stressful) aspects.

Research Design and the Effects of Parenthood

The methods that are used to study the transition to parenthood are likely to affect the outcomes. The early methods suggested that new
parenthood results in major adjustment problems, but this conclusion may not be warranted. This point was clearly made by Cook and Campbell (1979), who identified three kinds of evidence that are essential if researchers are to be confident that parenthood causes any problems that might be reported by individuals or couples. That is, if researchers wish to claim that parenthood causes a drop in marital quality (to take a specific example), they need to be able to show that parenthood

- is associated with lower marital quality (cause and effect go together)
- comes before a lowering in marital quality (cause precedes effect)
- is the best explanation of the lower marital quality (other explanations ruled out).

Coming up with these kinds of evidence requires two main “design features.” First, researchers need to use longitudinal designs, in which they follow a group of couples from pregnancy until after the births of the babies. Second, they need to include a group of “comparison” couples who are not going through the transition to parenthood, and to follow them over the same period of time. In this way, it is possible to monitor changes in couples’ relationships as they occur. It is also possible to see whether any changes in marital quality are similar for the two groups (a finding that would suggest an effect due simply to the amount of time spent in the relationship), or greater for the transition group (suggesting an effect due specifically to parenthood).

**Other Developments in Studying New Parenthood**

There are two other important respects in which studies of the transition to parenthood have become more sophisticated. The first of these concerns the methods used to assess people’s experiences of parenthood. We have seen that the early studies relied either on clinical assessments, or on retrospective reports obtained by interviews. Although it is easy to be critical of these methods, in fact there is no perfect way of documenting parents’ experiences.

For example, interviews can be a rich and detailed source of information, as long as they do not involve retrospective reports. However, precisely because they provide so much information, limits have to be placed on the number of questions asked and the number of people