Young women’s transition to motherhood: relations with partners and visions of motherhood

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Ewa Rzechowska

Abstract: The study uses a processual approach drawing on the modern definition of reproductive health, which recommends individualised measurements of populations. A case study analysis is performed to build a comprehensive empirical model of transitions in young women’s relations with their partners and visions of motherhood, which are critical to understanding young adult females’ reproductive health. Data necessary to reconstruct the setup of individual life paths were collected using exploratory interviews and questionnaires and analysed in the framework of the Strategy of Process Transformation Reconstruction (PTR). The PTR strategy is an innovative tool that combines the qualitative analysis of individual cases and C4.5 Quinlan’s algorithm to make generalisation. The empirical model of internally diverse types of relationships and visions of motherhood formed by young Polish women consists of a sequence of variants showing the evolution of the character, and ways of building and integrating intimate relationships with motherhood. The model can serve as a matrix for creating analytical categories that can be used to describe young women’s relations with their partners and visions of motherhood, construct psychological scales, and plan therapeutic procedures.

Keywords: C4.5 Quinlan’s algorithm, case study, motherhood, relationship, reproductive health

Introduction

As a result of the wide array of life tasks and roles that contemporary young women can choose from, motherhood ceases to be a natural element of adult life, becoming one of many competing life projects and one of the possible ways to enter adulthood (Pożegnanie z Matką... 2012; Pustułka, Buler, 2020). The majority of young women prefer self-development, good education, a rewarding job, and financial independence over intimate relationships and having a child.

The classics of developmental psychology considered motherhood a developmental task that comes with the optimal fertility age (Havighurst, 1981). Today, because women tend to have their first children at older age, motherhood is defined as an ability which matures after 30 years of age (the so-called mature motherhood – Czarnecka, 2019).

This article deals with young women’s transitions to motherhood in the context of their relations with their intimate partners and visions of motherhood. The term ‘transitions to motherhood’ should be understood herein as women’s inner transformation from the “I won’t be a mother” attitude to the readiness of becoming one, reflecting the character of their relations with their partners and visions of motherhood associated with or independent of their current partnerships. The analysis of transitions to motherhood takes account of women’s personal and developmental transformations and their socio-cultural and technological contexts (changing family relations, interactions in the real and virtual world).
1. Before I become a mother: women’s personal and developmental transformations and ways of building relations with intimate partners

For last a quarter of a century, ‘accepting the consequences of one’s actions’, ‘living by one’s values and beliefs’, ‘feeling independent’ were indicated by university students as the most adequate criteria of adulthood, whereas phrases such as ‘graduation from education’, ‘marriage’, and ‘parenthood’ were considered the least relevant (Jensen, 1997). Recent studies confirm that the tasks and roles typical of the previous generations are losing their stabilising, socially-defined character, which gives young people more space for personal autonomy and independent decision-making (Arnett, 2004), as well as increasing the variety of relationships and visions of future motherhood (Wiszejko-Wierzbicka, Kwiatkowska, 2018). A stronger focus on priorities and the absence of a well-defined system of references make young people more exposed to inner conflicts and the feeling of underachievement (Długosz, 2017).

Studies of intimate relationships focus on the factors that attract two people to each other (similar interests, the need for someone close, the way they perceive, communicate and respond to each other; Reis, 2012) and the processes that create intimacy between two people, such as emotional self-disclosure (Clark, Fitness & Brissette, 2007) and intimate expression (Cordova & Scott, 2001). Because of the article’s focus on young women’s visions of motherhood in the context of their relations with their partners, the personal and developmental characteristics of the study participants are presented below.

Many psychologists posit that women have an inherent tendency to perceive the world in terms of interpersonal relations (Moir, Jessel, 1993) and that the nature of femininity consists in seeing oneself in relation to others (Borysenko, 2000). In other words, women’s interactions with other people are characterised by sensitivity, an inclination to understand other people’s needs and feelings, bonding with them, and showing emotional closeness.

The female model of communication involves active listening and sharing feelings. Women more frequently than men look at their relationships, capture disturbing signals earlier, and give support, mainly through conversation (Brannon, 2002). A woman’s development in a relationship is marked by subordination and dependence on the partner’s support at the beginning and becoming a responsible, supportive companion after a time (Brzezińska, Piotrowski, 2010). The transition is challenging for women given considering their tendency to build relations while remaining in a subordinate position (Mandal, 2000; Mandal, Lip, 2022). Trying to oversee a relationship from this position may lead to a sense of loss and insecurity. A problem faced by women in building equal relations with their partners is also their readiness to accommodate other people’s expectations and needs and give them priority over their own wishes (Kaschak, 2001).

Becoming a romantic partner to somebody else is a defining experience for the female identity because family relations, intimacy, and a feeling of belonging are more important for women than for men (Palus, 2010). The achievement of emotional independence from the parents and the quality of relations with them (Czyzowska, Gurba, 2016) influence women’s functioning in intimate relationships. In both cases, relational sensitivity that helps to recognise interrelationships plays a significant role.

Women’s perception of their relationship as attractive is shaped by their self-image and the images the partners hold of each other. The self-image is significantly determined by the level of self-acceptance and consistency between each partner’s ideal and real images of self. The greater the consistency, the more likely the partners are to see each other as attractive; this association is particularly distinct in women (Prężyna, 1996). A woman’s assessment of herself as a partner depends to a large extent on how consistent her real and ideal images of self are and on the correspondence between her reactions and interpretations of developments (Bem, 1972). It is noteworthy that a role in the women’s perceptions of their intimate partners, relations in the partnership, and partners’ behaviours towards them and other people is also played by their values, experiences, and relations with the parents (Michaeli, Hakhmigari, Scharf, Shulman, 2018; Lindell, Campione-Barr, Killoren, 2017).
Women who have difficulty building close relations with partners, friends, and parents sometimes seek compensation on Internet forums (Plantin, Daneback, 2009), where they may flirt or date other users or engage in various interactions. The relative ease of crossing the borders of privacy and intimacy in the virtual world makes it a convenient vehicle for self-creation and self-promotion based on one’s actual or alleged successes or exceptionality, or, contrastingly, exploring misfortunes, losses, and problems (Sikorska, 2019; Maciąg-Budkowska, Rzepa, 2017). Opening the door to one’s personal world and disclosing one’s intimate problems to others may sometimes arise from a genuine need to find a solution, but more often than not it is an attempt to gain attention and acceptance, consolidate or boost self-esteem, or satisfy the need for closeness, which is easier than in the real world (Pedersen, Lupton, 2018).

2. Societal expectations toward women and childcare models

For many modern women, having a child is one of life projects that frequently has to give way to self-development, a career, and living an interesting life. Women who do not have children meet with disapproval but also face society’s inconsistent expectations regarding motherhood: take a job and leave children alone. Motherhood is seen by them as a burdensome and unpaid position and a constraint on their freedom and independence (Maciąg-Budkowska, Rzepa, 2017) that erodes their attractiveness and ruins their careers (Bakiera, 2014; Żelazkowska, 2016). Women’s awareness that having a child will change their lives to decide for themselves. The model of the Mother Pole is gradually being replaced by the western model of “intensive mothering” (Hays, 1996). Despite their dissimilarity, both contain an element of child-centeredness and have mothers subordinate their wishes to the child’s needs.

The intensive mothering model holds that mothers should have expert knowledge of childcare, commit their emotions, financial resources, and time to the child and make sure that it has the right conditions to development. It also emphasises the quality of the time spent with the child (Hochschild, 2003).

Motherhood is also undergoing professionalization. Young women tend to dismiss the experiences of their mothers and seek information and solutions from physicians or childcare experts, and sometimes even bloggers or celebrities. As a result, online forums and blogs significantly redefine their understanding of motherhood (Johnson, 2015; Plantin, Daneback, 2009; Dankiewicz-Berger, Cendal, 2019). Nevertheless, as researchers have observed, online discussions on parenting problems continue to refer to solutions developed at the participants’ family homes (Pustułka, Buler 2020). As well as expecting women to respect long-established childcare routines, society also requires her to be a committed mother and an attractive woman, and to foster relations with her partner and family life while developing her professional career (Pufal-Struzik, 2017).

The following empirical analysis of 20-30-year-old women seeks to determine different levels of their relations with their intimate partners and related visions of motherhood to advance the understanding of how they transition to motherhood.

3. Materials and methods

The analysis utilizes a processual approach derived by the author from Sadana’s definition of reproductive health (Sadana, 2002). The definition holds that individualised measurements of populations are more appropriate as they allow their distinctive characteristics to be identified and facilitate comparisons between and within populations.

The processual approach resulted in the construction of an innovative Strategy of Process Transformation Reconstruction (hereafter the PTR Strategy; Rzechowska, 2021; Rzechowska, Szymańska, 2017), which, unlike the commonly used theoretical frameworks, standardised research tools, and indicators, enables the empirical reconstruction of the phenomenon under study including its internal architecture, spectrum, and the mechanisms driving its transformation. To build the model of a phenomenon, the PTR uses qualitative analysis of individual cases and C4.5 Quinlan’s algorithm, one of the data analysis methods.
mining methods. The study was designed to present different ways of building intimate relationships and visions of motherhood by young Polish against the background of their life paths.

The study recruited 116 childless women aged 20-35 years of different socio-demographic backgrounds using a snowball method. Given the expected intricacies of young Polish women’s intimate relationships and visions of motherhood, exploratory interviews and questionnaires were selected (Rzechowska, Krawiec, 2016). Their purpose was to gather as much potentially useful information about the subjects as possible, especially pieces of information that might reveal aspects that theoretical studies have not addressed or insufficiently recognised, and which could accomplish the aim of the study. The exploratory interviews involved the use of a detailed ‘map’ of issues that emerged as significant during the research planning stage (Rzechowska, 2021, pp. 69-70). Interviews lasted around 2 hours each and were conducted by developmental psychology seminar students trained and supervised by Rzechowska. The study protocol conformed to the ethical and data security standards for psychological research.


The PTR Strategy was conceived outside of the dominant theories and models to enable the empirical identification of information about a phenomenon that other studies failed to identify, to capture its changeability and inner diversity allowing for subjects’ initial characteristics at successive stages of analysis. The strategy is carried out at two levels involving: 1) an idiographic analysis of cases, and 2) the generalisation of results leading to the creation of a multi-variant model of a phenomenon (Fig. 1).

Figure 1. A PTR Strategy flowchart.

1 Unlike traditional psychological research using descriptive statistics, the RTP Strategy utilizes a processual approach that captures the inner diversity of phenomena (intimate relationships, motherhood, etc.) and describes subjects by means of tens to several hundred individual attributes such as age, socioeconomic status, etc.
4.1. Level I: An analysis of a single case

The idiographic analysis was aimed to recognise the inner architecture of respondents’ life paths, including their approach to building relations with other people in the real world (the partner, family members, etc.) and the virtual world, in the context of their visions of motherhood. The idiographic analysis included:

1. The transcription of interviews and preliminary analysis of record's details. The interviews’ recordings were transcribed adding interviewers’ comments on the interviewees’ non-verbal reactions, which could help categorise their responses.

2. Creating a network of analytical data categories for re-analysis. The data were reviewed several times and categorised and organised according to empirically established criteria.

3. Description of the internal architecture of each case. Each transcript was recoded using a network of analytical data categories, which made it possible to standardise the records. Each of the 116 respondents in the database was described by 123 attributes.

4.2. Level II: An analysis of sets of cases

Level II of the analysis was to enable the creation of a model of the phenomenon under study. The following actions were performed:

1. Using Quinlan C4.5 algorithm to create a decision tree. The cases were classified into groups based on the similarity of their characteristics using the C4.5 (Quinlan, 1993). The algorithm derives from the assumption that a large dataset may contain some latent knowledge that the ‘regular’ statistical methods cannot reveal. Thus, a decision tree can reveal patterns other than predicted by theory or unrealised by the researcher (Nisbet, Miner, Elder, 2009, p. 231).

2. Psychological interpretation of the decision tree to identify variants of the phenomenon. The interpretation of the decision tree proposed in this study consisted in classifying women with common characteristics determined by the structure of the tree to reconstruct different ways of building relations with the partner and visions of motherhood (Fig. 2).

The values of the attributes preliminarily suggest that women representing Variant 5 positively viewed their motherhood, described their child concentrating on his or her internal character-
istics, pointed to their parents as trustworthy persons, and were relatively independent of other people's opinions. To learn more about the V5 women, the database was searched for information omitted by the decision tree or revisiting the transcriptions of the interviews if necessary. A set of the women's characteristics made it possible to create their personal portraits, relations with partners, and visions of motherhood.

3. Constructing a model of the phenomenon. Using the above approach, eight variants of the respondents were identified (V1-V8) and compared with each other allowing for their internal structures. Next, the variants were analysed and ordered to construct a model showing the course of the phenomenon (increasingly mature relations with partners and visions of motherhood), its internal diversity, and contextual influences.

4.3. Assessment of research credibility

The credibility of the research was acknowledged by independent competent judges, who verified data coding, structuring, and decoding. The credibility of the outcomes of the analysis of the sets of cases was tested by calculating the decision tree error (its value was 9.5%, well within the acceptable limit of 25%) and the internal logic of each variant and the entire model were evaluated.

5. Results

This section describes the eight variants of young women's intimate relationships and visions of motherhood based on the results of the decision tree analysis. They showed that the V1-V2 respondents' relationships were based on friendship and partnership and their visions of motherhood were unrelated to their current partner; the V3-V4 variants were in the process of building their relationships and the motherhood plans they were making involved their partners; the V5-V6 women were at a stage of consolidating relations with partners and planned motherhood together with them. Women representing V7-V8, had challenging childhoods that affected the quality of their relations with their close ones and made them postpone motherhood so that they could concentrate on their personal needs and development.

5.1. Focus on self and one's future: trying on the shoes of a partner and a mother

The V1 and V2 women were the youngest in the sample. Their narratives concentrated on their experiences and activities and visions of motherhood (how it should be performed, the gains and losses that come with it). Their intimate relationships and visions of motherhood were influenced to a large extent by their families, particularly by their mothers whom they considered a model or an anti-model for building relations with the partner, societal scripts and the experiences of other women.

V1: Being a partner and a mother understood in terms of fulfilling duties. Concerns about comfort of living.

The V1 women (mostly 21-24 year olds, n = 6) were raised by the grandparents because their parents did not get along with each other well and rarely participated in their upbringing. As a result, having grown up, they criticised their mothers for not showing them warmth and understanding and for being too strict on them.

Intimate relationship.

The V1 respondents described their current and future relationships in idealistic terms conforming to societal expectations. Although they were satisfied with their relationships, they characterised them superficially, as supportive and responsible men who were accepted by their families. The descriptions of the intimate relationships were more specific and included elements such as maturity, mutual respect, trust, and partners' ability to compromise. Their projections of the future assumed they would have higher education, a husband, two children, and family responsibilities but omitted references to their current partners. Their relations with the partners lacked
commitment. They spent a lot of time hanging around with their friends and visited Internet forums where they revealed their personal experiences seeking quasi-intimacy, interest, and acceptance from other users.

Motherhood.

The V1 women wished to be mothers but their visions of motherhood were incoherent. They both idealised and emphasised the demands and sacrifices it involved. They thought that pregnancy and birthing were as enriching, joyful, and wonderful as scary experiences. The risks and hardships of pregnancy and birthing, and the uncertainty of whether they would be able to take proper care of the child, made them anxious. At the same time, they consoled themselves by saying that they would find a way to cope with maternal duties or that other women were not fully prepared to be mothers, either. Their pictures of motherhood centred on responsibilities: they wanted to raise their children following the established childcare scripts to avoid ‘feeling remorse if they made a mistake.’ They intended to be perfect mothers (loving, patient, and understanding), give their children what they lacked in childhood (trust, acceptance of needs, and support), or wanted them to be like the children they once wanted to be. They hoped their children would be healthy and brave people surrounded by friends and having a goal in life and having higher education. The V1 women’s visions for their future lives were not limited to household duties and raising children. They planned to have time for their own activities and development.

V2: Trying on the shoes of a mother based on other women’s maternal experiences. Current partners unrelated to motherhood.

The V2 women 21-24-year-olds (n = 18) and 25-26-year-olds (n = 4) had loving families that respected their needs when they were children. Now, as adults, they maintained close relations with other family members, and considered their mothers to be their role models.

Intimate relationship.

The V2 women did not describe their partners or their relations with them, focusing on the foundations of a good relationship: spending time together, and sharing interests, concerns, and pleasures. In their opinion, honesty and responsibility were central to an intimate relationship. When faced with problems, they would seek assistance from their closest ones, usually family members, rather than their partner. They frequently used Internet forums to share their personal problems and experiences with other users.

Motherhood.

The V2 respondents extensively talked about motherhood as if they were getting emotionally ready for it. They shared detailed accounts of their friends’ or acquaintances’ pregnancies (ailments, less attractive, etc.), birthing experiences, and the challenges of raising children, imagining themselves to be in their position. They were anxious about how they would feel during pregnancy, and whether they would have sufficient skills to be mothers. At the same time, however, they trusted in their motherly instincts and that their families would help them in need. Their visions of motherhood centred on themselves and their childcare activities. They imagined themselves as mothers who would look after their children but would allow them to explore the world around them and make decisions for themselves and wanted them to live by the same values they were taught by their parents. The maternity experiences of other women seemed to have a personality-shaping effect on the younger V2 respondents (imagining oneself as a mother), a self-esteem boosting effect (a child would be the envy of my friends), and a visibility-improving effect (pregnancy and walking with a pram are ‘cool’). The older V2 women’s narratives about their future motherhood were largely consistent with those presented by the younger ones. They, too, talked about pregnancy, early baby care, and taking care of themselves in terms of the predominant standards. Although their narratives also accentuated ‘I’ and ‘my’, they gave less emphasis to their needs and the desire to be free than the younger V1 women.
5.2. Building relations with partners and increasingly realistic visions of motherhood

Aware of life’s realities, the V3-V4 women (22-31-year-olds; n = 9) departed from societal scripts towards pragmatism. They expressed commitment to making their intimate relationships stronger and believed that their partners wanted to be a parent too.

V3: Intimate partner as the closest person. Financial independence as a prerequisite for having a child.

Being always emotionally and financially supported by the parents, the V3 respondents (22-31; n = 9) now wanted to repay their care by helping them in need.

Intimate relationship.

The V3 women described their relationships as involving partnership, trust, honesty, mutual support, and free of trivial conflicts, to which both they and their partners, whom they characterised as caring companions and friends, were committed. They believed that they made plans and thought of having children together. A recurring theme in their conversations with the partners was financial problems caused by a lack of steady jobs. Despite satisfying intimate relationships and having trusted friends, the V3 women would share private details of their relationships and families with other social media users.

Motherhood.

The V3 representatives realistically envisioned motherhood as a set of tasks. They felt ready for motherhood but did not want to have children until their financial situation was good enough to allow them to create the best conditions for their development. They claimed their partners wanted to have a child, too, but tended to perceive motherhood as their task. Unlike the V1 and V2 variants who interpreted motherhood through their actions and emotions, they stressed the quality of relations with the child (openness, honesty, respect) and motherly qualities (thoughtful, supportive), and characterised the process of upbringing (setting boundaries, teaching values and morals, and showing the world to the child).

V4: Intimate partner as the closest person. Financial independence as a basis for building a relationship and becoming a mother. Having a child as one of life tasks.

The V4 women (22-30-year-olds; n = 22) had safe homes and loving parents who imposed high expectations on them. As children, they perceived them as too high, but they developed their own life standards around them.

Intimate relationship.

The V4 women described their partners as caring, and supportive friends and the closest persons they had, with whom they spent plenty of time together. They trusted them and considered their advice in making decisions. They entered their intimate relationships with clear visions of future lives acquired from their parents, in which financial security preceded motherhood. As they believed, their life plans were approved by their partners. Despite their claims that it was their partners who were the closest to them, the V4 women reserved readiness to help their family members. Their transient relations with other social media users made them similar to V1-V3 variants, but unlike the latter, they did not disclose sensitive information about themselves or their close ones.

Motherhood.

The V4 women wished to be mothers but not until they had a job and financial security. They were concerned that having a child too early might damage their careers and intimate relationships. Self-sufficiency and financially independence were necessary for them to create good conditions for the child’s development. ‘Having a child,’ ‘a mature intimate relationship,’ and ‘motherhood’ were included among their life tasks. The pictures of their motherhood were very clear: they wanted to be demanding mothers who set boundaries for their children and teach them values, like their mothers did.
5.3. Strengthening relations with the partner and building a mature vision of motherhood

The V5-V6 women were at a stage of strengthening their intimate relationships. Depending on the variant, they developed visions of motherhood (V5) or planned to have a child soon (V6).

V5: Developing the relationship and building its material basis. Having a child as a natural consequence of a mature relationship.

The V5 women (23-26-year-olds; n = 10) were raised in tender homes by parents who supported their decisions. The responsibilities they had as children caused them to become well-organized and dependable persons. They maintained close relations with the parents, whom they helped and were helped by in need.

Intimate relationship.

The intimate relationships of the V5 respondents were based on trust and understanding. They discussed their decisions with their partners and planned the future together, which included marriage and parenthood. They were also the first ones to mention their contribution to the relationship: engagement, avoidance of conflicts, and ongoing support for the partners, whom they appreciated for being honest, frank, and spontaneous. Their partners were also the only persons to whom they could open up. Their use of the Internet was practically limited to exchanges with friends and searches for information.

Motherhood.

For the V5 women, motherhood was something real. The decision about having a child was to be made by the partners together. Being already interested in motherhood and the needs of a child, they searched the Internet to learn more on these topics to be able to take care of their child. They were aware of the consequences of parental errors (unclear rules, not setting boundaries) but wanted to give their future children some freedom so that they could learn from mistakes how to cope with difficulties. Their visions of motherhood integrating protectiveness, looking after oneself, and family and career responsibilities.

V6: Developing closeness and intimacy with the partner. Partners’ readiness for parenthood.

Most respondents in the sample were classified as variant V6 (24-31-year-olds; n = 34). They had warm memories of their childhoods and parents, especially of the mothers who were always ready to help them and became their role models.

Intimate relationship.

Some of the V6 respondents had been married for some years, and others had been in intimate relationships or planned to get married soon. They shared a belief that closeness and intimacy come from trust, shared interests, understanding, commitment to a relationship, solving problems, and spending time together. The decision about having a child was to be made by both partners.

Motherhood.

The V6 women were physically, mentally, and emotionally prepared to embrace motherhood. The decision to have a child was reached by both partners. They could afford to have a child because of the professional and financial status they attained. The V6 women were ready to cope with maternal duties. Like those comprising the V5 variant, they emphasised that a mother should set boundaries for the child, etc. Reconciling the roles of a parent, a partner, and an employee did not seem difficult to them. They and their partners were trying for a baby but without urging each. Some of the V6 women had suffered a miscarriage of which only their husbands knew. The experience cemented their relationship.

5.4. Breaking free of family constraints and focusing of one’s needs and development: uncommitted relationships and postponed motherhood

The V7 and V8 women were the oldest in the sample. Their decisions to postpone motherhood to concentrate on themselves and their self-development reflected their difficult childhoods during which they had to look after their siblings. They lived in uncommitted but satisfying relationships, stressing their right to live free of other people’s expectations, to pursue their needs (V7), or to concentrate on personal development (V8).
V7: Uncommitted relationships and seeking compensation for difficult childhoods. Motherhood equated with subordination and lost life opportunities.

The V7 women (30-32-year-olds; n = 3) had inconsistent memories of their childhoods. In one picture, they were carefree children raised in families living by traditional values. The other picture showed them as children overburdened with tasks, having to look after their siblings, stay out of their way, and cope with difficulties on their own while receiving little interest from the parents.

Intimate relationships.

The V7 respondents had been in uncommitted relationships for many years. They characterised their partners as attractive and willing to compromise, but omitted their contribution to their relationships. They tried to win others’ attention by creating their image and status by parading things desired by their friends on social media.

Motherhood.

The V7 women viewed motherhood as a hypothetical construct unrelated to their lives. In their opinion, as motherhood necessitated concessions to the child’s needs, it posed a risk to the woman’s preferred lifestyle. They could accept having a child in the future if it did not compromise their comfort in life and after certain conditions were met. They currently wished to live exciting lives without commitments and they primarily sought compensation for what they lacked in childhood.

V8: Difficult relationships. Postponed motherhood and the pursuit of personal development.

The V8 women (23-28-year-olds; n = 10) had mothers who managed to rebuild families after divorcing from bullying and controlling husbands. They both nursed resentment towards them for being made to look after their siblings and do numerous chores in their teenage years and felt gratitude for the care and attention they received from them.

Intimate relationships.

The V8 women had been in several failed relationships. They were similar to their mothers in letting their partners dominate them but unlike the latter, they terminated relationships when their partners did not meet their expectations. They wanted their future relationships to be founded on mutual respect and comparable involvement. They viewed their future partners idealistically, as attractive, intelligent, and tender men, and themselves as independent persons making their own decisions. The V8 frequently engaged in exchanged on internet forums, where they talked in detail about their private lives and work to win and maintain other users’ attention or, occasionally, to find support.

Motherhood.

The V8 women were considering having a child but postponed the decisions due to the demands of motherhood. They expressed uncertainty as to whether they were mature enough. Impressed by how their mothers coped with dysfunctional marriages, they adopted them as role models for handling problems in life. When describing themselves as future mothers, they drew on their childhood and teenage experiences and referred to the established childcare script requiring teaching values to children. The V8 women’s current interests focused on their personal development and maintaining close relations with their mothers.

6. Transitions in building close relations and visions of motherhood

An analysis of the variants allowed the direction of changes in respondents’ relations with their partners and visions of motherhood (Table 1).

6.1. Personal growth, relations with the partner and a vision of motherhood

The V1 and V2 respondents were dependent on other people’s attention. To feel secure, they followed societal scripts (V1) or referred to the experiences
of other people (V2). Variants V3 and V4 had visions of their future life and claimed to be open to symmetrical relationships; in fact, they wanted to control them and kept their partners out of some domains that only the members of their families or Internet forum users were allowed to enter. The V5-V6 respondents’ ability to introspect and self-reflect and their growing autonomy and awareness of life changes contributed to the increasing integration of their relations with their partners. The V7-V8 women having suffered from a deficit of care in childhood, now wanted to get what they lacked as children. Seemingly independent, they were sensitive to others’ opinions and sought pursued challenges might make them look important and special.

6.2. Close relations as a basis for creating the visions of motherhood: partners and the Internet

Intimate relationships: ways of building relations with partner.

The V1-V2 women satisfied many of their relational needs outside of their relationships. They lived their own lives but expected their partners to comply with their wishes. They discussed matters important to them with loved ones or users of online forums. The V3-V4 variants were committed to strengthening their intimate relationships with their current partners whom they described as future fathers of their children. As they respected them, they avoided showing behaviours that might end up in arguments. They only talked openly with the members of their families and sought solutions to their personal problems among Internet forum users. They appreciated their relationships but did not want to give up on their independence, which they interpreted as having money and being able to decide when to have a child. They had lists of things they wanted to achieve in life (for themselves and their partners). Their individualism apparently hindered building intimacy with their partners and gave a utilitarian bias to their relations. The V5-V6 respondents were building mature relationships where both partners were aware of their responsibilities, relied on each other, and kept other people out of their personal matters. They did not hold any particular expectations for their partners to meet. When making plans for the future, they made sure to address their and the partner’s individual needs. The V7-V8 women had been in the same long-term relationship or several short-lived relationships. Their relationships were uncommitted and attractive for both partners, who concentrate on their individual or ‘common’ needs. Their partners were absent from their long-term life plans. Their understanding of independence in a relationship was inconsistent: their need for autonomy and freedom from others’ expectations or commitments coexisted with an inclination to pretend submission to make others do what they wanted.

Relations with Internet forum users and the extent of self-disclosures.

The nature of the women’s online activity suggested that it had to do with their relations with partners and parents. The V1-V2 sought to attract attention and gain acceptance by making themselves ‘visible’ (V1) or disclosed their problems to be noticed (V2). The V3-V4 respondents claimed that they and their partners were committed to developing their relationships but sought relations in the Internet that might complement their relations with their close ones. The V3 women disclosed their problems with partners and parents to other forum users; those comprising V4 variant even formed temporary acquaintances but avoided disclosing any information that might be used to identify them. The V5-V6 women, used the Internet mainly to communicate with their friends or find information. The V7-V8 women, who wanted to leave their rough childhood behind, tried to gain attention on social media by emphasising their similarity to their friends and acquaintances (V7), or bringing up their problems (V8).

6.3. Visions of motherhood

Each of the variants had a markedly different vision of motherhood of how to be a mother because of the women’s different levels of personal development.
Table 1. Variants V1-V8: relationships with partners and visions of motherhood

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<th>Motherhood</th>
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<td>• using the Internet to gain attention and acceptance by making themselves “visible” (V1) or by disclosing their problems (V2)</td>
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<tr>
<td>• visions of motherhood built around emotional imagery</td>
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<tr>
<td>• being a mother described in terms of social scripts (fulfilling responsibilities; V1) or one’s own actions, based on friends’ experiences (V2)</td>
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<tr>
<td>• family experience as a reference point for motherhood: not to be like parents (compensatory need to give the child what they lacked; V1) or to be like parents (V2)</td>
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<tr>
<td>• a mother’s right to have time for herself</td>
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<tr>
<td>V3-V4: Building relations with partners and increasingly realistic visions of motherhood</td>
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<tr>
<td>• commitment to deepening intimate relationships with current partners</td>
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<tr>
<td>• partners as caring friends and future fathers</td>
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<tr>
<td>• relationship as a source of security, alongside the desire to maintain personal freedom and independence</td>
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<tr>
<td>• considering one’s own life plans as common to both partners</td>
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<tr>
<td>• work, relationship, child as a successive life tasks</td>
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<tr>
<td>• financial independence as the basis for building a relationship and becoming a mother</td>
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<tr>
<td>• searching online for relationships that could complement current partnerships; disclosing problems with partners and parents (V3) or making temporary acquaintances without revealing personal details (V4)</td>
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<tr>
<td>• the plan to become a mother in the future, the belief that the partner wants to become a father</td>
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<tr>
<td>• perception of motherhood as a personal life task</td>
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<tr>
<td>• financial and personal independence a prerequisite to the decision to have a child</td>
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<tr>
<td>• motherhood identified with building a relationship with the child, creating conditions for his personal development, transmitting values</td>
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<tr>
<td>• involvement in raising a child and building a close relationship</td>
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<tr>
<td>V5-V6: Strengthening relations with the partner and building a mature vision of motherhood</td>
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<tr>
<td>• focusing on one’s own actions making the relationship with a partner more mature</td>
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<tr>
<td>• flexibility and balance between partners’ responsibilities, mutual accountability</td>
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<tr>
<td>• non-involvement of others in the affairs of the partnership</td>
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<tr>
<td>• making plans for the future, taking into account their individual needs as well as those of their partner</td>
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<tr>
<td>• using the Internet to communicate with friends or search for information</td>
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<tr>
<td>• jointly discussed decision on parenthood and readiness to become a mother</td>
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<td>• motherhood/parenthood as participation in the child’s development and acting for the child’s benefit</td>
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<td>• awareness of changes in the child’s development and the need to adapt care activities to them</td>
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<td>• awareness of the consequences of parental failures</td>
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<td>• reconciliation of child care with other life roles</td>
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<tr>
<td>V7-V8: Breaking free of family constraints and focusing of one’s needs and development: uncommitted relationships and postponed motherhood</td>
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<tr>
<td>• difficult childhood experiences and marital failures of parents</td>
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<tr>
<td>• being in non-committal relationships that are attractive to both partners</td>
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<tr>
<td>• following their own paths in life and focusing on their own needs or those shared with their partner</td>
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<tr>
<td>• manipulating a partner to fulfill their own goals; in case of failure willingness to end the relationship</td>
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<tr>
<td>• not considering partners in long-term life plans</td>
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<tr>
<td>• online activity, aimed at drawing attention to oneself by emphasizing one’s similarity to friends and acquaintances (V7) or revealing one’s own problems (V8)</td>
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<td>• omission of information about the desirable qualities of mothers</td>
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<tr>
<td>• equating motherhood with subordination and loss of life opportunities</td>
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<tr>
<td>• specifying the conditions under which they could become mother</td>
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<tr>
<td>• portraying motherhood from the position of a disadvantaged child who has had adult responsibilities imposed on them and has not been provided with sufficient care</td>
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<tr>
<td>• the child as an impediment to realizing one’s own needs and goals</td>
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<tr>
<td>• focusing on the present: actions undertaken as compensation for a difficult childhood (V7) or focusing on personal development (V8)</td>
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</table>
Me and childcare.

The V1 women were concerned about being a mother, while variant V2 was more concentrated on the demands of motherhood. Both variants built their concepts of motherhood around their imagination. The V1 women perceived motherhood as a phenomenon that inspired admiration and fear but also made them concerned about their pregnancy, birthing, and ability to take proper care of the child. Their childcare concepts drew on popular scripts prescribing what mothers should do to avoid remorse. The way they defined proper motherhood reflected their compensatory need to give the child what they lacked as children. They wanted their children to have what they were not given, to be the persons they wanted to be. They also stressed that a child should not be an obstacle to a mother’s right to have time for herself. The V2 women were ‘trying on the shoes of a mother’ drawing on the experiences of their friends who already had children. Their visions of motherhood were a combination of concerns about pregnancy, birthing, and childcare, the adequacy of their maternal skills, and ability to look after themselves. Similarly to their parents, they wanted to support their children in exploring the world.

Developing relations with the child and creating conditions for its personal growth.

The V3-V4 women wanted to be parents and believed their partners wanted the same. They perceived motherhood as their personal life task and linked the decision to have a child to achieving financial and personal independence. Their visions of motherhood were more coherent than those presented by variants V1 and V2. The V3 women emphasised the importance of relations between a mother and a child, activities stimulating a child’s development, and teaching values. The concepts of motherhood presented by the V4 women who had loving but demanding parents were more developed. They wanted to commit to raising their children and have a close bond with them. Variants V3 and V4 knew how they would stimulate the personal growth of their children: they wanted to set expectations for them, make sure that they were safe in exploring the world, and teach them values.

The well-being of the child and participation in its development.

Variants V5 and V6 similarly understood motherhood as acting for the good of the child, but differed in their readiness to have a child. The V5 respondents’ visions of motherhood accentuated the development and needs of a child at different stages. They were preparing for motherhood by seeking useful information. They understood the importance of the mother’s daily support for the child’s development and the consequences of parental failures, e.g., not setting boundaries for the child (see V4). The V6 women were already ready to have a child. Both variants shared the belief that they would be able to reconcile childcare with other life roles.

Perhaps someday.

The V7-V8 women did not talk about what characteristics mothers should have. They specified the conditions under which they might become mothers and relived their childhoods when they were prematurely forced into adult roles. They also concerned that a child might make it more difficult for them to pursue their needs and goals.

7. Discussion

Understanding how young women see life, what they expect from it, and how they picture their near and distant future is a prerequisite to developing adequate reproductive policies. However, many studies on 20-30-year-old women are designed to verify hypotheses and use research tools investigating how the women’s and their partners imagine themselves as a relationship or parents. As a result, their results are discrepant with the women’s actual procreative decisions. This inconsistency seems to arise from the fact that young people tend to include parenthood in their life plans and goals but omit it when describing their future in more specific terms (Długosz, 2017). The use of research methods concentrating on the selected aspects of the phenomenon without giving due attention to its complexity, diversity, and contextual changeability is also a problem.
The results of this preliminary study has only partly confirmed the relationships presented in the theoretical part, probably due to the use of an analytical method different from those employed by other researchers and the rate of changes in personal development processes and cultural and technological contexts. The discussion presented in the article is unique in that the sequence of variants (V1-V8) is considered terms of problems referred to in the theoretical section, or the results of other studies are juxtaposed with the empirically identified continuum of interpersonal relations in relationships and visions of motherhood.

The results of the study confirm the variety of young women’s relationships and visions of motherhood (Wiszejko-Wierzbicka, Kwiatkowska, 2018) and their different approaches to motherhood. They also point to a non-linear association between their age and readiness to become a mother and a multitude of personal development paths (Arnett, 2004), as well as enabling different approaches to defining motherhood and its position among other activities to be compared.

The variants identified in the study defined motherhood differently, as a developmental task or ability that reaches maturity after 30 years of age (Czarnecka, 2019). Around one-fourth of the respondents (aged 22-32; n = 31; V3-V4) included motherhood in their life-plan (see: Havighurst, 1981). The understanding of motherhood as an ability was common among the youngest and oldest respondents (V1-V2 and V7-V8) who emphasised living comfortable life, and women in relationships that were ready for parenthood (V5-V6).

The results of the study seem to cast doubt on whether motherhood competes with other roles that young people assume at entering adulthood, as some researchers suggest (Pożegnanie z Matką... 2012; Pustułka, Buler, 2020). They show that the position of motherhood relative to other life roles is modified by women’s personal maturity, which also influences the quality of their relations with the partner, visions of motherhood, and themselves as mothers. Compared with the less mature respondents who concentrated on their favourite activities and postponed motherhood until later, the more mature ones (V5-V6) were capable of integrating different activities (including those related to motherhood). The same pattern was observed for motherhood and self-development (Zelazkowska, 2016). Some of the respondents equated self-development with improving abilities and competencies and consequently put off motherhood as a potential obstacle (V1-V2, V7-V8). The more mature ones (V5-V6) viewed self-development more broadly, adding personal development and improvement of relational skills to it. As a result, they tended to define themselves in terms of their relations with their partner and both partners’ readiness for parenthood.

7.1. Relations with intimate partners: theoretical and empirical confrontations

The study found that the quality of women’s relations with their partners depends on their personal maturity measured by their personal perspective (“I” or “we”) and time (a tendency to refer to past, present or future time). The more mature respondents were the only ones in the sample who used a ‘we’ perspective’ to refer to their commitment to the relationship, their attitude to the partners (“I don’t raise issues that might provoke arguments”), and how they got along with them (“there are things that we only discuss between ourselves”); the other women’ narratives about their partners and relationships centred on their expectations.

The study confirmed a relational understanding of the world and a tendency to build community and closeness attributed to women (Moir, Jessel, 1993; Borysenko, 2000). However, the characteristics were revealed in the respondents’ narratives about their future and not current relationships. Even the references they made to current events (V2 – ‘experiencing’ other women’s pregnancies) were dominated by the future and a personal perspective” (“how will I cope with it?”). Only the most mature respondents were capable of looking at things from different time perspectives and consider them in terms of ‘we’.

The results of the study did not fully confirm the existence of some of the relationships presented in theoretical part of the article. For instance, the duality of women’s relations with their partners –
commitment to building a relationship accompanied by a tendency to accept partner’s domination evoking a feeling of confusion and insecurity – accentuated by many authors, e.g., Mandal (2000) was only found in those respondents who had challenging childhoods (V7-V8) or whose parents rarely participated in their upbringing (V1). The former faked submission to manipulate their partners into complying with their wishes and the latter gave little attention to their current relationships, being concentrated on planning their future, perfect relationships. In both cases, a feeling of loss or insecurity appeared to be a cause rather than an outcome.

The excessive readiness of women to adjust their boundaries to others’ expectations suggested by Kaschak (2001) was also expressed in a special way in the study participants: the V3-V4 variants were in symmetrical relationships but worked towards financial independence to be able to achieve singlehandedly what they viewed as their (and their partners’) – money and parenthood.

The study found that some of the characteristics of women’s relations with their partners presented in the theoretical part of the article only occurred in the mature respondents. Those women did not talk about what they expected their relationships and partners to give to them but presented in detail their efforts to develop bonds with their partners and how they fostered their relationships; worked on self-control (“I avoid doing things that might end up in misunderstandings”; Bem, 1972), fostered communication with partners (listened actively, talked about feelings, etc.; Brannon, 2002), adjusted their perceptions of self and the partner to make them more realistic (Prężyna, 1996).

7.2. Young women’s motivations for online searches

Respondents’ voluntary references to their use of the Internet revealed that they rarely used it to seek information about motherhood. The aims of their online searches included seeking information for their friends who had children (V2) or information about motherhood (V5) (Plantin, Daneback, 2009). While the respondents believed in the benefits of professional mothering, the younger of them expected that their mothers would help them to take care of the children (V1-V2), which was aligned with the traditional patterns of childcare identified by researchers in the online discussions (Pustulka, Buler, 2020).

For the majority of the respondents, the Internet was important as a space where they could make new acquaintances and satisfy their needs (V1-V4 and V7-V8) for attention, acceptance, self-esteem, and closeness, even if the price for was disclosing their and other people’s secrets (Maciąg-Budkowska, Rzepa, 2017; Pedersen, Lupton, 2016). The mature respondents (V5-V6) used the Internet for more pragmatic reasons.

7.3. Visions of motherhood

The results of the study generally pointed out that expert knowledge, professionalism in parenting, and emotional, financial and time commitments were important elements of the respondents’ visions of motherhood (Hochschild, 2003). The maturity of the visions increased with each variant, moving from the respondents’ focus on their activities as mothers activities and established childcare patterns (V1-V2), through mothering concepts reflecting an increased awareness of the importance of the quality of contact with a child and the environment in which it grows and develops (V3-V4), to a vision integrating motherhood, relations with the partner and other major life roles (V5-V6). A similar transformation was observed regarding respondents’ visions of a child: from seeing it as an object of the mother’s actions through stressing the importance of personal contact with a child and creating conditions for its development to emphasis on its development.

Conclusions and implications

The analysis of case studies described in the article enabled the construction of a comprehensive empirical model capturing transitions in young female adult’s relations with their partners and visions of motherhood, which are important to understand.
their reproductive health and wellbeing. The model consists of a sequence of variants showing the evolution of the character and ways of building relations and integrating intimate relationships with motherhood. The sequence starts with the participants (1) ‘trying on the shoes’ of a mother’ based on societal scripts or other women’s mothering experiences without involving the current partner, then moves on to (2) motherhood perceived as one of the life tasks that would be undertaken together with the current partner but still considered from a personal perspective, and ends with (3) integrating mature relations in the relationship and the partners’ decision to spend life together and have children. The study also identified a special variant comprised of women who had difficult childhoods.

Because of its properties, the presented model can be used outside the scope of this study. For instance, it can be used to create matrices for: (1) psychological scales based on the empirical models of phenomena rather than theoretical frameworks (see: Rzechowska, Szymańska, 2017); (2) individualised diagnoses and predict potential directions of changes; (3) therapeutic procedures addressing a wide range of problems relating to relationships, procreation, and wellbeing; (4) training addressing critical points in making decisions about further course of activities or ways of solving problems.

The article depicts the subtleties of young women’s visions of motherhood and relations with their partners, which can be useful for deepening and specifying the understanding of their wellbeing and reproductive health.

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Bibliography


