

Reasons for Delaying the First Birth for Mothers Aged 35 and More

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ABSTRACT

Background: Background of research was Psychological studies of late parenthood motives author Irena Bímová. **Aim:** The aim of the research was to determine the reasons for postponing the first birth for mothers after 35 years of age.

Methods: The group selection criterion was a primipara age 35 and more. A semi-structured questionnaire of an original design was used to collect the research data. The number of respondents was 92. Data were obtained on obstetric and neonatal departments from January 2013 to January 2014. To analyze the data was used Fisher's exact test.

Results: The most frequent reason for birth postponement amongst mothers aged 35 and more was the search for a suitable partner. This option was selected by 42.4% mothers. The second most frequent answer involved issues with conception, this being reported by 32.6% mothers. Additionally, the survey research included a retrospective positive or negative evaluation of the mothers' age when they had their first child after the age of 35. In retrospect, the age for the first birth was seen positively by 45.7% women and negatively by 54.3% women. Women evaluating the age for the first birth negatively significantly more often reported the reason "Problems with conception" (p = 0.014). Women evaluating the age for the first birth positively significantly more often reported "A preference of an independent way of life" as the reason behind their birth postponement (p = 0.039). **Conclusions:** The reasons for birth postponement of the first child amongst late mothers fell into the areas of social, psychological, and health-medical related issues. The research can lead up to reflection about postponing parenthood. The research can lead up to debate about thinking of risks or benefits of later parenthood.

KEYWORDS

first child, late motherhood, motherhood causes amongst older women, retrospective evaluation

INTRODUCTION

Maternity of older women (i.e. late motherhood) is not a new phenomenon. The number of older mothers (the term refers to a woman in travail upon reaching 35 years of age) is increasing every year. Based on international research project, Berryman, Thorpe and Windridge published a summary of basic psychological aspects of a delayed or late motherhood in 1995 (1).

In the Czech Republic, there has been a progressive increase in the average age of mothers at the birth of their first child since 1990. While in 1989, the average age of Czech mother at first birth was 22.5 years (2), in 2000, it reached 24.9 years, and in 2006,

it was 26.9 years. According to data from the Czech Statistical Office (2015), the average age at first birth was 29.9 years in 2014 (3). The increase was 7.4 years during 25 years. The average age at first birth was 29.1 years in Slovakia in 2012, 26.6 in Poland, 28.7 in Austria, 27.7 in Hungary and 29.1 years in Germany. The highest average age of new mothers, at the age of 30.8, is in Switzerland and the UK (4).

The trend of postponement of conception of the first child to a higher age is also accompanied by an increase in the intensity of childlessness, which was at a very low level in the Czech Republic before 1989. At present, we can see an increase in childlessness mainly in the age group of 18-25 years. This trend is



largely caused just by the planning to start a family at a later age (5). From the perspective of mothers, there are many reasons to postpone childbirth to a later time or to remain childless. It is necessary to consider which factors affect this change in reproductive behaviour. Bímová dealt with the causes of delayed parenthood and included personal development, motivation for parenting and marriage, psychological and social pressure and the positive and negative aspects of parenting among the psychological aspects of late parenthood (6). Delaying the first childbirth to a later age brings certain risks. It is thus desirable to examine more this issue scientifically.

Social and psychological risks of parenting in old age are mainly because of large age difference between parents and children. They are associated with the fear that elderly parents will not be able to raise a child and will not be able to take care of the child until his adulthood. In contrast, risks of falling below the lower age limits are more likely of psychological (immaturity) and material character (economic dependence). Thirty years is a significant milestone, where there is increasing pressure on childless women to have children. Women are also beginning to realize the risks connected with postponing pregnancy more than before (7). Risk of congenital defects in the foetus grows with increasing age of primipara (8). Slepičková confirms that there are certain risks for both mother and child associated with late parenthood. This is especially an increased risk of premature birth, formation of Down syndrome, preeclampsia, etc. Prenatal diagnostics helps to prevent some risks (9). Beryman and Windigdgre focused on the experience with pregnancy, birth and the first year of motherhood in women aged 35 and more. Compared with women who gave birth at age of 20-29, older mothers were less inclined to blame childbirth paramedics from their pain; they were more responsible for the course of childbirth and were more interested in the health of their child (10).

As Langmeier and Krejčířová indicate (11), risk factors for late motherhood are known and scientifically justified. Late parenthood positive aspects, however, receive less attention. Older and therefore usually more mature parents, tend to be more responsible in the upbringing of their children, are sensitive to their needs and devote more time to them. Women are more confident in the parent role and the role of mother brings them greater satisfaction. They have mostly built a base of working career and are more willing to interrupt it for the time needed to provide care for children. They also tend to be generally more patient and to manage common educational difficulties better. The research of Balena showed that older

mothers consider the personal development of their children to be more important in contrast to mothers of younger age. Older mothers also perceive the future financial security of their child as more significant in comparison to younger mothers (12). On the other hand, parents in higher age are sometimes too strongly emotionally fixated on child, give him less autonomy and they are even overprotective in their educational approaches, in many cases.

OBJECTIVES OF THE WORK

The main objective of the survey was to find out the reasons for delaying parenthood and two sub-objectives have been set for its fulfilment. The first of these was to determine the reasons for delaying the first birth among mothers over 35 years. The second finding was then the re-evaluation of subjective age of mothers at first birth. We assumed that a group of mothers with retroactive positive evaluation does not differ from the group of mothers with retroactive negative assessment in reasons for the postponement of first birth. For this reason, the statistical hypothesis was determined as follows:

H0: Reasons for delaying motherhood are not significantly different between the group of women with retroactive positive evaluation and the group of women with retroactive negative evaluation.

HA: Reasons for delaying motherhood are significantly different between the group of women with retroactive positive evaluation and the group of women with retroactive negative evaluation.

METHODOLOGY

Subject of investigation

A pilot study on a group of five women selected from the target population was made prior to the implementation of the survey. The purpose of this pilot study was to determine whether the women would indicate the reasons for delaying motherhood and what these will be like. A pilot study was conducted as a non-standardized interview. After its implementation, the questions were compiled based on a literature search and the results gained from piloting.

Preliminary research on 15 women was conducted after the pilot survey. The questionnaire was modified on its basis so that the items were clearly understandable. The offer of reasons for delaying the first birth has been extended based on results obtained in the pilot study.

The research was carried out by questionnaire technique in the period from January 2013 to January 2014. The sample of respondents consisted of



mothers who gave birth to their first child after 35 years of age. Women hospitalized at gynaecological and obstetric department and postpartum department were selected to fill out the questionnaire. It was a simple deliberate choice based on selection criteria - age 35 and more. Other selection criteria have not been established. We asked 105 women, of whom 92 women completed the questionnaire. 13 of the surveyed women refused to participate in the research without giving any reason. Data collection was made by a semi-structured questionnaire of our own design, created based on literature review and pilot studies. Respondents participated in all phases of the investigation voluntarily during their hospitalization at said departments. Respondents were also familiar with the objectives of the research and expressed their consent to participation in the research study based on informed consent.

Method

The questionnaire included three questions. The first semi-closed question examined the reasons for delaying the first birth. Respondents could choose more than one answer.

Question number 1

The exact formulation of multiple-choice question: "What are the reasons for delaying the birth of your first child?"

- a) Selection of a suitable partner
- b) Career, studies
- c) Difficulties to become pregnant
- d) Other diseases
- e) Fear of pregnancy
- f) Fear of childbirth
- g) Concerns about the health of the child
- h) Concerned about your own health
- i) Financial situation
- j) Housing problems
- k) Fear of losing freedom and liberty
- 1) Preference of independent lifestyle
- m) Difficulties in relationships
- n) Other, please specify

Question number 2 was conceived as dichotomous closed, focusing on re-examining of age evaluation. Respondents were asked to evaluate the satisfaction with their age at first birth. They were offered a hoice of positive or negative re-evaluation of age at the birth of their first child after 35 years. The exact formulation of question: "How do you evaluate retroactively your age at first birth?"

- a) Positive retroactive evaluation of age
- b) Negative retroactive evaluation of age

In the event that respondent answered question number 2 negatively, question number 3 followed.

Question number 3 (open) concerned the appropriate age at first birth. The respondents were asked to state the appropriate age for the birth of their first child.

The exact formulation of question: "Indicate what age would be suitable for you for the birth of the first child?"

Data processing was anonymous. We used the SPSS 19 Base software for evaluating the data. The data were analysed by Fisher's exact test at a significance level of 5%.

RESULTS

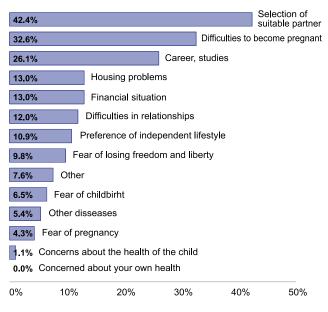
Age characteristics of the investigated group of mothers are shown in Table 1.

Table 1 Woman's age at birth of first child

	The whole set (n = 92)		
Age median	36.0		
Min-max	35-40		
Average ± SD	36.5 ± 1.6		

Legend: n-number of respondents, SD-standard deviation

"Selection of a suitable partner" was the most common reason for delaying the first birth among mothers over 35 years. 39 mothers indicated this option (42.4%). The second most common reason was "Difficulties to become pregnant" in 30 mothers (32.6%). "Career, studies" was the third most common reason for delaying parenthood. 24 mothers indicated this option (26.1%) (Graph 1).



Graph 1 Reasons for delaying the first birth – the entire set of respondents



Other reasons for delaying the first birth, which the women reported in 7.6% (Figure 1), are detailed in Table 2.

Table 2 Other reasons for delaying the first birth

Other reasons	Number of women	
Fear of childcare	1	
She had no maternal instincts	1	
Nepřipravenost	1	
Fear of pain	1	
Partner did not want it earlier	1	
Feeling of immaturity	1	
Preference of the child form partner	1	

The second research question investigated retrospective evaluation of maternal age. 42 women (45.7%) evaluated retrospectively the age of having the first child after 35 years positively and 50 women evaluated it negatively (54.3 %) (Table 3).

Table 3 Subjective evaluation of the woman's age at birth of first child

	The whole set (n = 92)	Women with positive retroactive assessment of age (n = 42)	Women with negative retroactive assessment of age (n = 50)
Age median	36.0	36.0	36.0
Min-max	35-40	35-40	35-40
Average ± SD	36.5 ± 1.6	36.2 ± 1.3	36.7 ± 1.8

Legend: n – number of respondents, SD – standard deviation

Women with positive retroactive assessment of age and women with negative retroactive assessment of age of birth of first child were compared in frequency according to the stated reasons for delaying using the Fischer exact test. Values of p <0.05, which show a statistically significant difference between the two groups of women, are in bold print in Table 4.

As is obvious from Table 4, there was a difference found in reasons "Difficulties to become pregnant" and "Preference of independent lifestyle." Women who retroactively evaluated the age of having the first child negatively, reported "Difficulties to become pregnant" as a reason for delaying delivery significantly more often (44% of women with retroactive negative age assessment vs. 19% of women with retroactive positive age assessment), p = 0.014.

Women who retroactively evaluated the age of having the first child positively, reported "Preference of independent lifestyle" as a reason for delaying delivery significantly more often (19% of women) vs. women with retroactive negative age assessment (4% of women), p = 0.039. Late parenthood thus was an expression of the free choice of these women. HA was accepted.

The group of women who retroactively evaluated the age of having the first child negatively (n = 50), would prefer the birth of their first child at a younger age, but they did not become pregnant for the reasons mentioned in Table 4. These mothers reported the period between 28-34 years as more appropriate age for the birth of their first child. Only one mother reported a higher age than the age at which she gave birth.

Table 4 The frequency of reasons for delaying birth of a first child after 35 years

Reason for delaying the first birth	Positive retroactive assessment of age (n = 42)	Negative retroactive assessment of age (n = 42)	p
Selection of a suitable partner	15 (35.7%)	24 (48.0%)	0.291
Difficulties in relationships	4 (9.5%)	7 (14.0%)	0.749
Difficulties to become pregnant	8 (19.0%)	22 (44.0%)	0.014
Career, studies	13 (31.0%)	11 (22.0%)	0.351
Fear of pregnancy	3 (7.1%)	1 (2.0%)	0.328
Fear of childbirth	3 (7.1%)	3 (6.0%)	1.000
Concerns about the health of the child	0 (0%)	1 (2.0%)	1.000
Concerned about your own health	0 (0%)	0 (0%)	-
Other diseases	0 (0%)	5 (10.0%)	0.060
Fear of losing freedom and liberty	7 (16.7%)	2 (4.0%)	0.074
Preference of independent lifestyle	8 (19.0%)	2 (4.0%)	0.039
Financial situation	6 (14.3%)	6 (12.0%)	0.766
Housing problems	6 (14.3%)	6 (12.0%)	0.766

Legend: n-number of respondents

DISCUSSION

The aim of the research was to identify the reasons for postponement of birth of first child among women over 35 years. Results of the survey are consistent with conclusions of Bartošová (13), who indicates the absence of a suitable partner as the most common barrier to motherhood. Researches of Slepičková, Bartošová (14) show that unsatisfactory relationships act as a major brake on efforts to motherhood. Women usually go through a number of unsuccessful relationships. If these relationships



meet an interesting career, Plans for having a child are postponed (14). Similarly, Lechnerová (15) states that absence of mental preparedness for the role of parents and the lack of a suitable partner with whom they would like to conceive and raise a child are the reason for postponement of reproduction until a ater age.

The mere fact of existence and extending of the childless period may in some cases lead to unintended consequences, which make the smooth transition to motherhood impossible. The combination of experience, which a woman experiences in a childless period, can result in the creation or strengthening of a so-called individualisation habitus (13). Tomášek (16) states that there is a progressive weakening of the ability of cohabitation and adapting to another human being in young singles. Among women over thirty, this trend is evident especially if they did not have longer experience with sharing a common household with a partner, lived as singles for a long time or have undergone a variety of partner experience, mostly without prospect of starting a family (16). The unwillingness to share a common household with a spouse occurred in these cases, together with preference for own freedom and independence. Although some of these women lived with a partner for a longer period, unequal distribution of roles in the care for household reassured them in the choice of independent living (13). Finding the right partner, which has been proven in the research survey as the most common cause of the postponement of birth of first child to a later age, confirms this.

The survey showed that women who retroactively evaluated the age of having the first child negatively, reported "Difficulties to become pregnant" as a eason for delaying delivery significantly more often (44% of mothers). These mothers reported lower age than their actual age at delivery, as a more appropriate age for the birth of their first child. Time for realization of parenthood shortens due to decreasing fertility of women of higher age. Aging of potential fathers and mothers is one of the main causes of the growing number of couples seeking specialized centres because of problems with conception (19). Doctors expect the incidence of the factors threatening the fertility in the coming years – such as venereal diseases, endometriosis, anovulation, eating disorders and obesity in women and sperm formation and quality disorders in men. In addition, the number of cured cancer patients of childbearing age is increasing, who have difficulty in conceiving a child because of previous treatment (18). Infertility is a problem that affects around 15% of couples of reproductive age in Czech population. However, these numbers are estimated to grow. More and more couples will either choose the technique of assisted reproduction or adoption, or accept a childless life (19).

Demographic transition accompanied by a change in lifestyle, which took place in 1989, had a significant impact on the number of childless couples. There were just 28% of childless Czech women in thirties in 2006 (2). Baby boom of strong age groups mothers born in the 70s culminated in 2009, when the seven-year rising trend in the number of births stopped (20). Since 2010, the fertility decline occurs. After stagnation in 2012, the decreasing trend in the number of births continued in 2013 (21). According to preliminary data, the number of live births increased year on year by 3,100 to 109,900 in 2014. It is thus the highest number in last four years (3). Most children were born to women aged 29-31 years (3). In 2014, it is already certain that baby boom of in recent years caused by the deferred fertility of generation of "Husák's children" gradually subsides. The cause of the expected decline in births can be found in the upcoming decrease in the number of women of reproductive age. A numerically weaker generation of women who were born in the second half of the 80s and 90s of the 20th century will reach the age of their highest fertility.

"Career, studies" is another reason for delaying the birth of first child among mothers over 35 years (26.1%), which is related to the above mentioned demographic transition. This group of mothers frequently stated beyond the "Career, studies" also the reason "Difficulties to become pregnant". It can be assumed that those women postponed their pregnancy due to the implementation of career and study and then they encountered problems to become pregnant. In connection with late parenthood, we can talk about the role of education and career in woman who builds a job position first and then decides for motherhood (9).

Changes and forms of family life, as well as the changing role of women in society and family life play a role in the postponement of birth of first child as well (6). An increasing number of women give more importance to professional career, which constitutes a possibility of "meaningful compensation of maternal role" for them. The child may represent a certain handicap in professional careers and his birth postponed to a later age for that reason. Qualitative interviews revealed that women focus on the issue of reconciling of motherhood and career, rather than a problem of choosing between them (22).

Mothers, who retroactively evaluated the age of having the first child positively, stated "Preference



of independent lifestyle" as the reason for delaying delivery significantly more often. The decision of these women to have their first child in higher age is their free choice. The current society leaves young people more time to get matured and prepared to take on all roles. They have mostly built a base of working career and are more willing to interrupt it for the time needed to provide care for children. They also tend to be generally more patient and to manage common educational difficulties better (11). This research may lead to reflection on the topic of postponing parenthood. "Selection of a suitable partner" is influenced by the personal characteristics of the women, her family upbringing, socialization and requirements and demands of today. From the health and medical point of view, "Difficulties to become pregnant" or pregnancy may occur in the higher age. Every woman should be aware of the potential risks of complications arising from the postponement of birth of first child to a later age in this case. "Career, studies" is currently part of the development of women lifestyle.

LIMITS

Results of the research cannot be generalized because the method used was not standardized and the survey was carried out on a small sample. Another limit may be the fact that not all the independent variables affecting late motherhood were taken into account.

CONCLUSIONS

The research results show that the reasons for delaying the birth of their first child at a later age belong especially to the psychological, social and health-medical area. Economic factors, such as problems with housing or financial situation, were not found as significant for delaying the birth of first child in the research study. "Selection of a suitable partner", "Difficulties to become pregnant" and "Career, studies" were the most frequently mentioned reasons for parenthood postponing.

All women have the right for delaying the birth of their first child at a later age. However, they should consider all of the risks arising from those choices at the same time and carefully assess the reasons for delaying. The more women will consider reasons for delaying the motherhood and plan the parenthood in accordance with their own attitude, the more the conception, pregnancy and the raising of child will be wanted and natural.

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