

Child care before 6 months of age: a qualitative study of mothers' decisions and
feelings about employment and non-maternal care

Short title: Child care before 6 months of age: a qualitative study

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ABSTRACT

Employment of women while their children are infants has increased in the UK in the last decade. This study of 57 employed mothers of infants less than seven months old examined their retrospective reports of planning child care and their contemporaneous feelings about the child care they were using, based on qualitative interviews. Issues addressed included mothers' reasons for returning to employment at that time, their theoretical preferences among a range of child care types and providers and the process of making actual choices, including the range and types of advice received and the involvement of fathers. Mothers were also encouraged to discuss their feelings about how child care was working out once the infant was settled. Continuing concerns expressed by mothers included the importance of open communication with caregivers, their desire to keep control over infants' daily lives and upbringing, worries about infants' safety and concerns about the levels of cognitive stimulation they received.

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INTRODUCTION

Employment of women while their children are infants has increased in the UK in the last decade and with it the numbers of children experiencing non-maternal, non-parental and non-familial care during infancy. As Brannen and Moss (2003) put it: “Childcare is all the rage today, the valued goal of government, employers and parents. England has a National Childcare Strategy, with a Childcare Unit in government to implement the strategy, targets for extra childcare places, and a Childcare Tax Credit to subsidize parents’ use of childcare services. But it was not ever so.” (p. 25)

Although society’s burgeoning interest in child care has been reflected in a large body of research addressing working parents’ choices of care for their children, most studies have been carried out retrospectively so our understanding of the relationships between parental beliefs and actions concerning child care is far from complete. A parent whose stated childcare preference and choice were identical may have chosen care to match her own views, but if circumstances led her to choose a non-preferred type of care she may have altered her stated preference so that it matched her real-life choice, reducing cognitive dissonance. Furthermore, such a choice may have significant feedback effects so that attitudes change to match practice (Pungello & Kurtz-Costes, 2000). Prospective studies are scarce, and information concerning parents’ contemporaneous feelings about finding and using non-maternal care in the first year of a child’s life is almost non-existent.

Decisions concerning maternal employment and related choices of child care are determined by multiple factors, including socioeconomic, interpersonal, and contextual characteristics. This small qualitative study is part of the large body of research that has attempted to identify the salient factors

Reasons for returning to employment during the first year

A wide range of factors influence decisions about returning to, or entering the workplace. The range may be especially wide when mothers decide to return to work early in an infant's life. Volling and Belsky (1993) examined the influence of socio-economic, parental, infant and contextual factors upon mothers' return to employment during the child's first year in a sample of American mothers. Women were asked to rate retrospectively the importance to their employment decisions of four factors pre-identified by the authors: (1) family's need for income; (2) fear of job loss; (3) personal desire to develop a career; and (4) personal enjoyment of working. Thirty nine percent rated the family's need for income as absolutely essential in their decision to resume employment. The desire to develop a career, and their own personal enjoyment of working, were rated as important by a majority of women while 'fear of job loss' was rated as somewhat important by around 20%. The reasons these women gave for returning to work varied according to their socio economic backgrounds. Women with lower incomes and less education were more likely to cite the need for income as a main reason to return to work. Women with higher incomes, more education and higher occupational status placed greater emphasis on career development and personal enjoyment of work. Among a relatively privileged subsample of mothers participating in the NICHD study of early child care in the USA (NICHD 2001), although 'financial reasons,' was identified as important, the main motive given for returning to employment was mothers' personal fulfilment. Specific reasons mentioned included 'enjoy job,' 'have special skills to offer,' and 'maintain self esteem.' (O'Keeffe, 2002).

Considerable research effort has been devoted to studying the significance of infant factors in mothers' decisions about employment and child care, but results have

so far been inconclusive. For example, Hock (1980) studied a group of mothers in the USA who planned to stay at home during their child's first year. A comparison of those who did indeed stay at home with those who had planned to do so but in fact returned to work, did not identify infant temperament as a significant factor. In contrast, Galambos and Lerner (1987), found that mothers in the USA were less likely to be working during the first months after childbirth if their child had a difficult temperament. Crockenberg (2003) reviewing American findings from NICHD concerning infant characteristics stressed the lack of clear-cut results concerning temperament. Most recently as yet unpublished UK data from the Families, Children and Childcare Study of 1201 families (www.familieschildrenchildcare.org) shows that at 3 months they were 1.5 times more likely to use child care for girls than for boys and that those using any non-maternal care were likely to use more hours of care for 3-month infants with non-adaptable temperamental characteristics(Sylva *et al.*, forthcoming).

Child Care Choices

Sparse research into child care choices is comprehensively reviewed by Pungello and Kurtz-Costes (1999). Among extrinsic factors, the most important determinant of the type of child care selected is often assumed to be cost, and the “affordability” of one type of child care compared with others is frequently mentioned by researchers and parents . However, careful studies of the effects of cost on child care choice show that relatively low price is only one of several extrinsic characteristics of which parents take account; location, hours and reliability often being equally important. Intrinsic characteristics of child care settings, such as caregiver/child ratios, group sizes, and caregiver training and/or experience, are widely accepted markers of child care quality but studies have shown that, in addition

to these, characteristics of individual caregivers such as their warmth and the quality of their interaction with the children, are important in parental choice. For instance, in a large sample of American mothers (Cryer & Burchinal, 1997), the item “caregiver-child interaction” had the highest mean rating of importance (Mean = 2.9 on a scale of 1 to 3) for mothers of infants and toddlers. In another large-scale study, of American mothers using family or relative day care (Kontos *et al.*, 1995), caregiver attributes were the most important reasons for parents’ choice of care arrangement.

Having known the caregiver previously was very important to many mothers, especially those using family day care. Having the caregiver (or setting) recommended by others was the next best thing. Previous acquaintanceship or a personal reference was the most common first reason given by mothers for using non-registered care, while preference for a family member was commonplace and was by far the most frequently selected first reason given by mothers for their decision to use relative care. (Bogat & Gensheimer, 1986; Rassin *et al.*, 1991).

Many of the studies reported by Pungello & Kurtz-Costes (1999) suggest that the extent of educational activities offered by childcare settings influence parents’ choices. However, neither an educational orientation in the programme offered to children nor the caregiver’s education or specialised training that might give rise to it, were important to the mothers studied by Kontos (1995). It may be that by selecting family day care or relative care, those mothers had already pre-judged educational issues as relatively unimportant. It may also be that the children were below the age at which many parents regard educational opportunities as important. A careful study of the variables related to the importance parents attach to educational issues in child care points out that even obvious correlates, such as parental education levels and expectations, apply only when children are over three years (Johansen *et al.*, 1996).

Types of care preferred and types used.

Several retrospective studies have asked parents which forms of non-parental child care they considered most and least desirable. Type of care preferred usually varies with the age of the child with mothers of infants more likely to prefer family day care or in-home care and mothers of pre-school children more likely to prefer nursery/centre care (Fuqua & Labensohn 1986; Pence & Goelman 1987;). Researchers have also explored relationships between the types of care parents say they prefer and the types they actually use. In each of two large American studies (Hofferth & Wissoker, 1992; Kontos *et al.*, 1995) about one-quarter of mothers, using a range of care types, were not using the type they most preferred.

Preferences may be conceptualised prior to a child's birth. In a prospective study of 102 employed American women (Pungello & Kurtz-Costes, 2000), more than three quarters of women in the third trimester of pregnancy said that they preferred parental care and this pregnancy preference was significantly related to actual care-arrangements at three months post partum. No information is available concerning any later care arrangements. As part of the longitudinal study of 1201 English families from which the present sub-sample was drawn (familieschildrenchildcare.org), a study in press (Barnes *et al.*, 2006) investigated the relationship between the infant care ideals of English mothers of 3 month babies, attitudinal, socio-demographic and psychological factors and their actual child care arrangements when the infants were 10 months old. Forty three percent of the mothers were using their preferred type. Those who realised their ideal type of non-maternal child care used care for more hours, though the largest group expressed a preference for maternal care.

Pungello & Kurtz-Costes (1999) delineated a theoretical model of child care choice behaviours relating choices to environmental contexts (such as availability of care), maternal beliefs about child care, child factors (such as temperament), and demographic characteristics of the mother. Subsequent research has been additionally concerned with the macro environment of institutions and government policies. Studies from the U.S. and from Europe have explored the relationship between external circumstances, including different economic opportunities and labour market conditions, and personal attitudes, in women's child care choices (Fagan 2000; Hakim, 2001; Pungello & Kurtz-Costes, 2000) while a study from the UK analysed the "choices" recent government policies have made available to mothers, the relationships in their child care decision-making between external constraints and existing attitudes and preferences , and the policy implications (Himmelweit & Sigala, 2003). A pilot study of a theoretical model relating child care selection to environmental context variables, maternal beliefs, perceptions and characteristics of the child demonstrates this wider multi-factorial approach (Seo, 2003).

However, as Pungello and Kurtz-Costes (1999) suggest, our understanding of all these choices and their interrelationships and contexts is limited not only by their innate complexity but also by complexities of methodology and the way in which these constructs are assessed. Characteristics of child care that parents endorse as important to them from empirically derived lists are often different from the features they select as important to them when they are choosing an actual care situation for their child. For example, ninety nine per cent of the parents studied by Bogat and Gensheimer (1986) selected health and safety features as the most important on a list, but fewer than nine per cent mentioned health and safety features as important to them when they chose real-life care for their own children. A recent study in the

USA (Shlay *et al.*, 2005) investigated low-income African-American parents' perceptions of quality, using an innovative factorial survey method, and their definition emphasized the care giving environment, and in particular the qualifications, experience, training and behaviour of the child care provider, stressing that they were willing to pay more for these characteristics. It was found in this study that parents who selected lower quality child care did so not because they did not know what high quality was, but because it was either not available, or not affordable.

Child care is high on the economic and political agendas of most Western nations and as more women return to, or join, the workforce early in their infants' lives, infant child care is of particular importance. There is broad agreement in the literature concerning the theoretical issues that are important in child care choices. However what is needed now is a deeper understanding of their impact on individuals while they are making, and living with, infant child care.

AIMS

This paper aimed to study in depth issues surrounding mothers' use of non-maternal care (minimum 12 hours per week) for infants less than 7 months old. Issues explored retrospectively were: reasons for returning to (or seeking) employment or education at a particular moment in the infant's life and processes of choosing current child care arrangements. Issues explored contemporaneously included: information and beliefs concerning non-maternal child care and feelings about current child care and the balance between work and home.

HYPOTHESES

1. Cost, location, hours and reliability will all be important to mothers' choice of child care type and care provider.

2. Infant characteristics will have a bearing on mothers' decisions concerning their return to work or study and choice of child care. 3. Mothers' attitudes to work will be important to the child care choices they make and to how they feel about them. 4. Regulatable attributes of the care setting, such as caregiver-infant ratios, caregiver training and educational programming, will be less important to mothers' choice of individual caregiver and feelings about child care than personal attributes such as warmth towards infants. 5. Mothers' choice of caregiver and feelings about ongoing child care will largely depend on how comfortable they themselves feel with the caregiver.

METHODS

Procedure

Sampling

The sample for the present sub-study was drawn from the main sample of 1201 mothers taking part in a five year prospective study of child care. (<http://www.familieschildrencare.org>). These 1201 mothers were interviewed when their infants were three months old. The interview included a series of questions about any non-maternal child care they were using at the time or were planning to use before their infant was 7 months old (see Barnes *et al.*, 2006 for full details of recruitment and the interview). Mothers were eligible for the in-depth study reported here if, at the time of the 3 month interview, they were already working and/or using non-maternal child care for at least 12 hours per week, or were planning to use non-maternal child care for at least 12 hours per week before their infant was 7 months old. Earlier studies have used both a twenty hour and a ten hour cut-off (Belsky, 1999). We chose a cut-off at twelve hours rather than ten in order to ensure that

infants' non-maternal child care experience covered at least two days a week, and rather than twenty in order to include mothers who were working part-time, as many English mothers do.

At the time of the 1201 three-month interviews, 101 mothers were using non-maternal child care for 12 hours per week or more. A further 426 mothers who were not yet using non-maternal care indicated that they soon would be (total 527), however, follow-up telephone enquiries established that only 304 of them were actually using at least 12 hours of any form of non-maternal care by the time their infants were seven months old (total 405) and 198 of these infants did not reach the appropriate age for this sub-study before the end of the time period during which the specialist child psychiatry registrars were available to conduct interviews. Accordingly 207 of the 405 mothers (51.1%) took part in the "early child care" study.

The "early child care" sample

To assess whether these 207 mothers differed from the pool of 405 from which they came, a series of group comparisons was conducted on factors found to be related to child care (Sylva et al., forthcoming): child's gender, birth order and birth weight; maternal age; mother's and partner's educational level; mother's and partner's occupational status (CASOC; Elias *et al.*, 1993); mother's, partner's and family income; whether the delivery was assisted; mother's general health and post-natal depression; lone motherhood; maternal ethnicity and mother-tongue (English or not); maternal and paternal beliefs in the benefits and costs of maternal employment (short form of Beliefs About Consequences of Maternal Employment for Children; BACMEC, Greenberger *et al.* 1988; maternal and paternal traditional or progressive child rearing attitudes (Schaefer & Edgerton, 1985). Categorical indicators were compared using Chi Square tests and continuous indicators using t-tests. Continuous

indicators were normalised and z scores compared (maternal and paternal income and education, progressive and traditional attitudes, beliefs about the effects of maternal employment).

The group of 207 included relatively fewer ethnic minority mothers (included 27, 13.0%; not included 41, 20.7%, $\chi^2 = 4.25$, $p < 0.05$), had slightly lower maternal and paternal annual incomes (maternal, $z = -1.996$, $p < 0.05$; paternal, $z = -1.944$, $p < 0.05$) and fewer educational qualifications (mothers $z = -2.218$, $p < 0.03$; fathers $z = -2.419$, $p < 0.02$). Relatively more working class families took part (47, 24.0% vs. 21, 11.2%, $\chi^2 = 12.07$, $p < 0.002$). Mothers included had less progressive and more traditional views about parenting (progressive, $z = -2.859$, $p < 0.004$; traditional $z = -2.536$, $p < 0.01$) and their partners believed in fewer costs to children of maternal employment ($z = -2.416$, $p < 0.02$). Thus overall, compared with those eligible, those who took part in the 'early child care' sub-study include fewer of the best educated, fewer of those with the highest incomes, and fewer of the most 'progressive' mothers.

The 207 mothers taking part in the "early child care" sub-study were offered three options, depending on the number of hours of child-care they used and their availability for interview:

1. Families using non-parental child care for at least 12 hours per week or planning to do so before seven months, were offered a maternal face-to-face, open-ended, tape-recorded interview and self-report attitude questionnaires to both parents, returned by post. (This option was not offered where the non-maternal child care was provided by fathers as these families were being visited for another study that investigated 'primary care giving fathers'. Such families were offered option 2.)

2. Mothers who did not want a face-to-face interview, and those using or planning child care for 8-11 hours per week, were offered a brief telephone interview and the self-report attitude questionnaires to both parents, sent and returned by post.

3. Mothers who did not want either interview were sent postal attitude questionnaires.

57 mothers took up option 1, the face-to-face interviews (plus questionnaires); 118 took option 2 (brief telephone interviews plus questionnaires); 32 took up option 3 (questionnaires only) and none refused to participate at all. Since only the face-to-face interviews are reported here, the generalisability of the results also depends on the representativeness of the in-depth interview sub-sample of 57 (option 1) in relation to all those eligible for the early child care study and in relation to all those who took part. Group comparisons were again conducted on the factors listed above.

The 57 mothers interviewed did not differ substantially from the total eligible pool (N = 405). The only significant differences were that their partners had slightly more educational qualifications ($z = -1.99$ $p < 0.05$) and both they and their partners believed in fewer costs to children of maternal employment as measured by the BACMEC (mothers, $z = -1.82$, $p < 0.07$; father $z = -2.73$, $p < 0.01$).

The 57 mothers did not differ from all those approached for the early child care study (N = 207) except that both they and their partners believed that maternal employment had marginally fewer costs to the child as measured by the BACMEC (mothers, $z = -1.69$; $p < 0.10$; fathers, $z = -1.86$; $p < 0.06$).

Those who were already using non-maternal child care were offered the follow-up interview soon after their three-month interview. Those who were not yet using non-maternal child care but planned to do so were contacted at the time they

had indicated child care would begin, to establish whether or not these plans had reached fruition.

The characteristics of the participants are shown in Table 1. The mean age of the mothers interviewed was 32.0 years, just over half had a boy, 7 were from ethnic minorities and English was not the first language of 5. The majority were in two parent families and they were predominantly in managerial or professional occupations, reflecting the fact that English mothers who use child care relatively early are more likely to be in higher status occupations (Sylva *et al.*, forthcoming).

Measure – the in-depth interview

The semi-structured tape-recorded interview, lasting approximately 90 minutes, was developed for this study. Closed and open-ended questions were generated from the literature (La Valle *et al.*, 2000; O’Keeffe, 2002; Volling & Belsky, 1993) and then piloted as part of interviewer training. The two interviewers were specialist child and adolescent psychiatry registrars, and there was an ongoing process of quality control with senior team members (PL, JB) listening to tape recordings of interviews and providing feedback. The interview first addressed the mother’s retrospective report of her decision to return to work and its timing, confirming the type of child care being used, the procedures such as making visits, taking up references and settling the infant in, and the current number of hours per week (see Table 2). It then explored, through open-ended questions, the processes by which families had identified and selected potential types of care and individual caregivers or settings, including their sources of information, and the people with whom they had discussed options. Mothers were asked to select the influences that had been important to their final decision from lists of sources (see Table 3). They were then asked about their infant-feeding arrangements, with particular attention to

breast feeding and expressing milk; strategies used to prepare for the child care and to settle the infant into the new arrangement; their feelings about separation from the infant; any specific fears they had for him or her and any effects the child care arrangements may have had on their mothering or on relationships within the family. Mothers were encouraged, through prompting, to expand on issues raised throughout the interview and asked to talk about their contemporaneous feelings and thoughts about working and using child care.

Since the mothers had all been interviewed for the main prospective study when their babies were three months old, personal details of possible relevance to child care decisions – such as whether this was a first or later-born infant - were already on record and known to the interviewer who was trained to enquire or prompt accordingly.

By definition this sub-group consisted of mothers of young infants who were also working or studying and using child care. Almost all of them went out to work or study (see Table 2) so most interviews had to be carried out in the evening or at weekends. This meant that fathers were often at home and sometimes present for all, or parts of the interviews, though the most common scenario was for the partner to be in the room at odd moments and looking after the infant elsewhere for the majority of the time . Unfortunately details about the extent of father presence were not recorded at the time by the interviewers. None of the fathers were their infants' principal carers, fathers who filled this role being the subject of a separate sub-study. Five infants had more than 12 hours of father-care each week but father-care was not the main type of non-maternal child care for any of them (see Table 2)

Analysis

The open-ended material and spontaneous comments from the interviews were transcribed and read by four of the authors (PL, JB, MN, JG) to develop initial themes using content analysis (Attride-Stirling, 2001; Britten, 1995; Silverman, 1993).

Themes identified were: (1) mothers' choice to work or study outside the home (see Table 4); (2) the selection of a particular type of child care (see Table 5) and (3) mothers' feelings about living with those choices. Themes were discussed and refined to create a coding framework. The codes in Tables 4 and 5 are organised into two levels, higher and lower order. Deductive coding dominates the higher order categories as they correspond to a large extent with those found in the existing literature (e.g. Volling & Belsky, 1993). Inductive coding dominates the lower level codes and those pertaining to mothers' feelings about their choices, the themes emerging from the interviews themselves.

Transcripts were coded to determine whether the respondent had made any remarks fitting into each code. Any particular statement could be included in more than one coding category. Each transcript was coded by at least two of the coders, and consensus reached through discussion. Atlas ti computer software was used to facilitate the coding and data retrieval. All names mentioned in the text have been anonymised. Case identifiers have been replaced by sequential numbers. When a father is speaking the case number is followed by F.

RESULTS

Work and child care

In accordance with the criteria set for inclusion in the sub-study, those interviewed had all returned to work or, in a few cases, to study before their infant was 7 months old (mean 4.5 months) and were using non-maternal child care for at

least 12 hours per week (mean 32.1, range 12.0 to 52.5). More worked part-time (29, 50.9%) than full time (22, 38.6%) with the remainder engaged in study (6, 10.5%). Almost all those who worked did so outside the home (44, 77.2%) or combined working outside and at home (5, 8.8%) with only 2 (3.5%) working exclusively from home. Just over one third (21, 39%) said it was their personal choice to return to work at the time that they did, the remainder saying that they would have preferred a later date.

Mothers were asked about all types of child care used. The most common type of care was a childminder (registered and inspected home-based care, 14, 24.6%, see Table 2) followed by a nursery (registered and inspected), a nanny (not currently registered) or a combination of two types of care (each 10, 17.5%). Almost the same proportion of infants was cared for by a grandparent (9, 15.8%) and a smaller proportion was with a relative or close friend (4, 7.0%). All but one of the combinations of two types of care (9/10) included grandparent care so that overall grandparents were the largest category of caregiver. There were no significant differences in the total number of hours of child care use depending on the pattern and type of care (see Table 2).

Since some infants were cared for by more than one non-maternal caregiver or in more than one care-setting, the dominant form of child care for each infant was also established according to the following formula: if there were two or more types of care totalling 12 hours or more, the child care with the most hours was chosen; if the same number of hours, (more than 8 per week) were spent in two types of care, the type that was most different from parental home care was selected as dominant—e.g. first nursery care, then a childminder, followed by a nanny, then a friend or relative and finally a grandparent. The most common dominant type was

childminding (15, 26.3%) followed by grandparents, nurseries and nannies (12 each, 21.0%) with fewer opting for relatives or friends as their main type of care (6, 10.5%) (see Table 2).

Information and advice received about type of child care

Almost three quarters of the mothers (40, 71%) reported having chosen their child care type before their child was born and most (53, 96%) said that the choice they had made earlier still felt right. The most common sources of information selected from a list of choices, were leaflets from the clinic or library (17, 30%), or other print media such as books, magazines and newspapers (15, 26%) (see Table 3). Information was also obtained from friends, at mother and baby groups and from family members, but not very often from antenatal classes (4, 7%). Almost a third of the mothers obtained information after their babies were born by talking to health visitors (18, 32%).

Almost all the women (49, 86%) had discussed child care with the baby's father, and half (29, 51%) had talked to their own mother (see Table 3). More than a third had discussed the choice of child care with friends and relatives. While nearly a third had obtained information from health visitors only 10 (18%) had discussed the options with them. Of those who talked about child care to anyone, most (39, 80%) had found discussions and advice helpful.

Choosing from a further list of options of which more than one could be endorsed, the main factors determining mothers' final selection were practical: availability (39, 68%), location (36, 63%) and cost (26, 46%). Partners' views (28, 49%) and personal recommendations (23, 40%) were also important (see Table 3).

Qualitative themes

I. Returning to work

The first order codes concerning mothers' decisions to return to work and/or use non-parental child care included contextual and financial constraints, maternal characteristics and infant characteristics (see Table 4).

1. Contextual

Second order themes related to contextual constraints were: the ending of maternity leave; work pressure and responsibilities; anxiety about job security; and finding that child care was available. At least one of these was discussed by nearly two thirds of the women (35, 61%; see Table 4). The most common constraint on decisions about when (and whether) to return to work was the ending of maternity leave (20, 35%). While many related a financial need for paid employment to the ending of paid maternity leave (see next section) the end of maternity leave also had a bearing on job retention and for many of the women that was equally important. They also reported feeling pressure and responsibilities that led them to return to work or keep on working (11, 19%) when they would have liked to spend more time with their babies.

“The main reason I went back at three months was cause I’d said I would. I’d got my new job, accepted it and everything and then found out I was pregnant. So it was a case of just really having to go back.” (1)

“The responsibility and the investment in my career as a professional... and we can’t really afford for me not to work.” (2)

For a small number (5, 9%) there was a definite fear of endangering their job security if they did not return once maternity leave had ended.

“It would have meant that I’d have lost my post. I wouldn’t have lost my position but my base would have changed,... they could have posted me anywhere they wanted, basically.” (3)

Others did not feel that their actual job was threatened, but felt obliged to return to maintain their promotion prospects.

“Financial reasons and job security basically. Career progression also because I’ve been there for quite a while now so to start all over again somewhere else wouldn’t be good, I’ve been working my way up in Pensions.”(4)

Only a small proportion (4, 8%) returned to work mainly because child care was available to them.

“I honestly do think that if Lizzie hadn’t been there to take her then things would have been different because I don’t think I would have been able to leave her with somebody I didn’t know, to be honest.”(5)

2. Financial

Clearly the end of maternity leave has financial implications and these had a bearing on mothers’ return to work. Financial factors included the pressures on the family’s total income, and to a lesser extent on women’s desire to maintain some financial independence. Almost half of the women interviewed in this study (27, 47%) mentioned financial factors influencing their return, most of them in conjunction with their lack of choice in the timing of that return.

“The main reason was financial in that my maternity money had stopped and we had saved sufficiently for me to have a couple of months without any income but it was a necessity for financial reasons...”(6)

Although more than half of those who were employed worked part time hours, even more would have liked to do so and could not because of financial constraints:

“ We thought long and hard about ways that we could afford for Janine to go part time if we couldn’t afford for her to leave altogether...” (7F)

This father had contemplated leaving his own employment and assuming the role of principal carer, reflecting the balancing act that many of the families were undertaking, weighing who could be the most productive ‘breadwinner’ against who they felt was the more appropriate carer(s):

“Part of me thinks I would happily give up work to look after Mark and to a certain extent that would make more sense because Janine earns more than I do....”(7F)

While financial constraints were mentioned by many as the main reason for returning to work, a few of the women who worked part time had worked out that there was little if any net gain to the household income once they had paid for child care:

“...I still don’t earn enough money to pay anything in the house... I just pay the childminder and for my petrol and that’s all so it’s a bit silly to do that.” (8)

Possibly they were maintaining their jobs so that they would not lose the opportunity to contribute to the family income in the future, or feared that it would be challenging to re-enter the work force, or pick up a career, after a complete absence:

“(I went back because) I actually enjoy work... there’s no financial gain of going back to work other than perhaps my own sanity and to keep my career going.... If I take everything into account... travel, childcare, absolutely everything I might just break even but it would be pennies.” (9)

For a small number of mothers (3,5%) having some financial independence was important:

"...I don't actually enjoy going to work but I quite like the independence of having my own money again..."(10)

3. Maternal factors

Reasons for returning to work relating to mothers' own personal needs included their personal career orientation, their need for relationships outside motherhood, and their enjoyment of work. One of these was mentioned by just over half of those interviewed (33, 58%). Career orientation was the most common, mentioned by more than one third (21, 37%).

"I wanted to go back because I like my job and I missed being with people and being part of a team and everything."(11)

"I couldn't ever see myself sitting down and not working. I couldn't do it." (3)

However their remarks included some ambivalence, some commenting that the precise timing had not been of their choosing. A career orientation did not necessarily mean they had chosen, or accepted, the timing of their return.

"I'd have liked another couple of weeks at home because when I went back it was only a couple of weeks since I started to feel on top of things.... confident; myself again; normal. I'd really started to enjoy my time with her and I'd have liked a bit more...." (12)

Mothers' need for relationships, experiences and companionship outside motherhood was mentioned by 18 (32%). For example:

"I had reached a point where I needed to go out into the big world again because it was just me and Beth and I wasn't seeing anybody or doing anything constructive." (5)

"I needed to have contact with other people; grown up people. People who don't have babies...."(8)

The distinction between the parent-and-baby world and the world of adults is interesting. For some mothers it was sufficient to have social interactions with other parents. They indicated that home and child-based life was enjoyable because ante- and post-natal groups, playgroups and resulting friendship networks provided plenty to do and plenty of people to do it with:

“I was going along to mother and toddlers group and just spending the day with Mary, we’d go out in the park or whatever and then meeting up with my friends from antenatal class and I’d go swimming to our local school pool at lunchtime... everyday there was something we could do and I just thoroughly enjoyed myself.”(7)

It is clear, though, that life at home with a baby would not be satisfactory for all women however many opportunities were provided within the local community.

Personal enjoyment of work – as opposed to being in the work world - was not an important reason for returning to work in this group of mothers, being mentioned by only 6 (11 %). Interestingly, one of these was the same mother whose enthusiasm for her home-based lifestyle is quoted above. In a notable example of the ambivalence some women experience with regard to their caring and working lifestyles, she added:

“(But) I had to keep up with my career; it’s something I’ve always wanted, to teach, I’ve always enjoyed teaching and being in the classroom...” (7)

4. Infant factors

Only a minority of women (7, 12 %) mentioned characteristics of their infant as an influence on their decisions about employment and child care. Two mothers spoke of feeling able to return to work when they did because their infants were “easygoing”.

“The type of baby she is, very easygoing and happy, makes me feel happier about using child care. If she was crying a lot or ill in the first few months... my instinct would have been to give up work. Her temperament makes things easier for us”. (5)

Four mentioned that their infant separated easily from them:

“He is a very good baby. If things had been different I can see that I might not have gone back as quickly but he’s extremely easy to leave with anybody. He just sort of gets on with it.”(13)

Both the mothers quoted above indicated that, had their infants been different, they might not have returned to work at that time. A third mother felt that her infant’s characteristics made having to go back to work when her baby was five months olds especially hard:

“He had colic his first three months so that was really a miserable time for both of us; then when he broke through the colic and became a happy little boy I only enjoyed that for 2 months and I wanted longer than that..” (7)

A small number of mothers (3, 1.8%) said that their decisions about work and child care were influenced by what they perceived to be their infant’s need to socialise with other children.

“Six months was a good age for him to start nursery. He’s not clingy and it’s important for him to have that interaction with kids.”(14)

“If I had the choice I would probably have gone back to work later. But my partner said to me ‘you need to see other people, and not just Jason’... And also the fact that Jason needed to see other people as well.”(8)

However only one of the three described her infant as really enjoying time in the nursery and her enjoyment as an important reason for her continuing to work part time:

“She’s happy in the nursery. You can tell. When I get her from the creche at my exercise class (1 hour) she’s thrilled to see me and she’s obviously nervous being poked by all those two year olds. But when I get her from the nursery she’s happy and smiling” (15)

II. Which child care?

In conversations about choosing childcare there was not a clear division between the type of care and the individual caregiver chosen, so these have been combined. Decisions were determined by practical factors, the attributes of the carer, wider contextual factors such as the media, features of the child care setting, mother-carer relationships, infant factors and finally the role of partners (see Table 5).

1. Practical, contextual

Practical, contextual issues, specified by the majority of the respondents (50, 88%) dominated mothers’ decisions. These practicalities could lead to choices that had previously been considered ideal being abandoned. For instance, if a mother who planned to look for a childminder found that there was a nursery just across the road from her workplace and that it had places available, she was likely abandon her original intention. Under this primary theme were the sub-themes of convenience, availability, cost, care being offered, and the need for flexibility in the hours of the day that care was available.

Convenience and availability were the factors that were mentioned most often (convenience, 36, 63%; availability, 33, 58%)(see Table 5).

“My husband and I work quite long hours.... so I like to have somebody who lives in. And if we want to stay out till 1-0-clock in the morning completing a transaction then the nanny can go to bed...”(16)

In a third of cases (18, 32%) parents seemed to fall into, rather than choose a particular type of care or a particular caregiver; this was usually when a family member or close friend volunteered their services.

“I chose my mother-in-law because she was available. That was the main thing. In fact we were discussing what we were going to do and she offered.”(17)

“I was talking to my friend one day and she offered... her daughter had just started school so she said she wouldn't mind. And it was someone we knew and trusted.”(18)

Other parents, faced with finding and choosing child care appropriate to the decisions they had made concerning the mother's return to work and their opinions regarding child care type, often left the task late and sometimes ended up with what was available rather than what they considered to be ideal.

“I was in a bit of a panic by the time I found her (childminder) cause I'd only got a couple of days left..... It's not what I'd have chosen. I wish there were other options open to me quite honestly; I'm annoyed that there aren't. I think more should be done to help. Just because you work it doesn't mean that you're financially able to afford what you'd like...” (19)

Almost half (25, 44%) reported being strongly influenced by the cost differentials between types of care:

“We had seen a couple of nurseries and found out that it was way beyond-too expensive. This was the third childminder we’d seen. Cost was the main influence.”(20)

When mothers had more than one child, or worked unsocial hours, their main focus was often on the flexibility that the care could offer; many of these opted for a nanny:

“My work is fairly demanding and I need to be able to give 100% when I’m at work...You know, we’ve had two days when the nanny has been sick and that’s quite difficult to handle at work.” (21)

(Final choice, nanny) “I was trying to find a childminder ... who could take one of them to nursery and pick up, and look after a baby at the same time. I only found two people that were physically able to do that combination of duties.”(22)

2. Attributes of the carer.

Almost all the women (52, 91%) had views about which particular attributes they thought desirable in a carer, though the types of attribute varied widely. The most frequently mentioned concerned their personality or attitudes to childrearing (27, 47%) (see Table 5).

(Childminder) “She took an immediate interest in who she would be maybe caring for – the others didn’t do that so much.”(20)

“I think personality is very important – and this nanny is one of life’s happy people.” (16)

Almost as frequently mentioned (25, 44%), was “being already known to the family”. Mothers who talked about the importance of leaving their infant with a known (and therefore trusted) carer tended to feel strongly that only a family member or a longstanding friend would do:

"If it wasn't going to be me it had to be my mum... there's nobody else I'd trust."(11)

(Friend) "The thought of Tom with stranger really freaked me out."(23)

Being experienced with babies was also important to many of the mothers (24, 42%)

(Nanny) "Previous experience, with looking after other peoples' babies as well as her own." (24)

and so was "relating well to children/this child" (23, 40%)

(Childminder) "She, well immediately she asked if she could pick him up and she cuddled him and walked round with him and that's what I wanted.

Someone who'd love him. Someone he could see as another mother". (25)

Less than a quarter of the mothers (11, 19%) mentioned that they looked for a carer who was qualified:

(Nursery) "At the crèche they are sort of qualified people and they're pushing her on and sort of teaching her things."(17)

Finally, a similar proportion (10, 18%) looked specifically for a caregiver who could take a mothering or nurturing role with their infant.

"For the very early years I still wanted that one-to-one that a childminder could give as opposed to a nursery. A continuity of person. If I wasn't there I just wanted someone who could be, not Mum, but definitely the one person to go to... the person they knew would be there." (9)

3. Attributes of the care setting.

Not every mother (43, 69%) expressed views on care setting attributes that they were seeking, possibly because many (especially first-time mothers) were not aware in detail of what they might encounter or expect in a nursery or at a child

minder's house. Indeed not all knew what changes would need to be made to familiar settings, such as a grandparent's home, to make them appropriate for a small baby. The most frequently mentioned attributes of the setting concerned the ratio of adults to children and the total number of each (29, 51%).

These comments tended to focus on whether the care setting should be a nursery group or some domestic-scale, even one-on-one, care with a relative or nanny. Different mothers felt equally strongly in favour of each type of arrangement. Among those who felt very strongly that only a group would do, this was sometimes because the mother did not want an individual carer "sharing" her own relationship with the baby:

"If she is going to get one to one attention, I want it to be from myself or Matthew, rather than a childminder" (26)

or because she did not feel able to trust a single carer who was not a relative:

"I wouldn't leave him with anyone but his Grandma. I don't trust anyone. If my Mum hadn't have had him I wouldn't have worked. They're all meant to be fine I know but you hear all these stories on the telly..."(27)

Other mothers felt equally strongly that group care in a nursery would not do, often relating this to the baby being so young:

"I wanted Alicia to have someone she could directly relate to – form a close relationship with, rather than being in a nursery with different people looking after her"(6)

Almost as many mothers (28, 49%) talked about wanting a setting that provided learning and social experiences. Many of these favoured nursery care in this respect:

“I liked the environment. They’ve got nice equipment and it seems caring and busy.” (28)

Relatedly, lack of stimulation (perhaps with too much television viewing) was given as a reason for avoiding individual care:

“Being in someone else’s home you just don’t know what goes on all day. I wanted her in a nursery where I could be sure she’d be with other children and get lots of stimulation.” (26)

Somewhat surprisingly, safety was mentioned by only 17 mothers (30%) and in almost all those instances the issue they raised was safety from abuse rather than safety from accidental injury:

“I think we all have more confidence in big establishments for some reason... it’s inherently there in most people that if it’s a big establishment its vetted by social services and they are going to have strict guidelines and you just feel more safe than you do with childminders... I had a colleague who had her son with a childminder and suspected she was being rough... so I guess it all stems from experience with other people that makes you think about these things. There seems less risk with a nursery” (29)

A smaller proportion (11, 19%) mentioned health issues, including feeding arrangements in nurseries or the likelihood of recurrent infections with a group of babies:

“The health visitor wanted me to start cutting out some of his bottles so I had a word with one of the nursery carers and they said ‘we’ll try it if you like but we think he’s too young’ so I said ‘well that’s what I’ve been told to do’. So we tried it for a couple of days and it was just a nightmare, he was so

miserable, and they said 'well look, why don't we just make them a bit smaller and see how we get on that way?' so that was really useful. (13)

The same proportion (11, 19%) remarked that they particularly wanted a home environment for their infant mentioning, for example, the relative peace that could be provided by childminders in comparison to nurseries.

"I have looked at a couple of nurseries and I think they're great for two and three year-olds but for a baby I think they need a home environment and they also need peace and quiet sometimes... Jean (childminder) has a cot for Natasha that she puts in her bedroom. When Natasha wants to sleep she goes upstairs and goes to sleep. In a nursery they provide cots and a bedroom but there are six cots in one room and at any time one's bound to be crying...."
(30)

4. Wider contextual influences

Three quarters (40, 72%) of mothers mentioned wider contextual influences on their decisions about child care. These included information and advice received from other people, previous experiences with older siblings in child care, and media coverage of childcare issues. Almost half the mothers (24, 42%) mentioned having discussions about child care with other people, especially with other mothers of their own generation. Few felt that the grandparent generation, or health professionals such as health visitors, had relevant advice (as opposed to practical help) to offer; indeed few of the mothers seemed to be looking for advice. They wanted information and/or opportunities to explore their own ideas.

" I discussed it with my next door neighbour cause she uses a child minder... what was useful was knowing the going rate of pay, what you were expected to

do as far as a contract was concerned... really what it involves to employ somebody.” (21)

“ I discussed the pro’s and con’s of various methods that friends had chosen... [No, I didn’t discuss it with my mother] she only worked part-time when we were children and it was different for her” (13)

A quarter (14, 25%) of the mothers said that their plans and arrangements for this infant were affected by experiences with an older child(ren) in childcare, and the same number talked of the impact of media reporting on their decisions. For some mothers, such as the one quoted below, the two influences were compounded, with media stories increasing the pressure on mothers to do again what they had safely done before.

“I suppose with Laurie, it was experience with siblings. Lucy was at nursery, you know. And also there was the, you know, Louise Woodward stuff in the press which does make you pause and think about leaving your child with, you know, one person at home.” (31)

Some of those who were considering child care for the first time were influenced not only by specific media stories but also by a generally anti-childcare *zeitgeist*.

“You hear so many stories... about nannies abusing babies and that. That’s why I wouldn’t leave her with anyone else... I just don’t like the idea of a childminder, I’d rather just have my sister.” (32)

5. Mother-carer relationship

More than half the mothers (31, 54%) talked about the kind of relationship that they hoped to have with their child’s carer(s). The key issue was ease of communication, mentioned by 20 (35%).

(Nursery) "I liked it that.. they were very much 'look, ring any time...don't feel you're being neurotic, just feel free'. Feeling free is what I want."(15)

A few mothers mentioned less positive aspects of communication:

(Nursery) "I need to find a way to sort something with them... she used to drop off to sleep quite happily but now I've noticed she cries and gets quite panicky and I think that's because they just leave her at nursery... mind you they've got 13 babies." (29)

A relationship in which the mother felt that the carer was trustworthy, and would act according to her wishes was mentioned by 18 (32%):

(Grandparents) "I think trust was the big thing. There was no question whether I trust them or not. I do." (33)

Again, not all the comments were entirely positive:

(Grandmother) "She might let him goggle at the TV for a few minutes but I'm confident she wouldn't go completely against what I want on a regular basis."(23)

Finally, the importance of shared values between mother and carer were mentioned by 15 (26%):

(Young aunt) "She's bringing my children up the way we were brought up and that's the way I want them brought up. Maybe if a childminder had them, I don't really know their history, their background, they might bring them up in a different way."(34)

(Childminder) "... We do come from a different... we see things differently. There have been a couple of issues that I'm actually considering moving Grace."(6)

6. Child Characteristics

A third of the mothers (19, 33%) noted that their choice of the type of care was influenced by characteristics of their baby. Most of these comments related to the baby's age (15, 26%), some indicating that their choice might change usually from an individual carer to a nursery group, when he or she was older,

(Grandmother) "We chose a nursery and hoped he'd start there when I went back to work, but now I think we're quite glad the place isn't coming up until much later. It feels much better while he's so little, that he's at home with my Mum."(35)

Only seven mothers (12%) referred directly to consideration of the baby's emotional well being in relation to their choice of care:

(Childminder) "I just wanted him to be happy really and I could see he was."(25)

(Childminder) "She was the third we'd seen. I thought a childminder would be more aware if either of the children was unhappy, because of the close contact."(20)

7. Partners

Twelve (21 %) of mothers spontaneously remarked on partners/fathers involvement in their child care decisions. These figures contrast with the responses to closed questions in which almost all the women (49, 86%) said that they had discussed child care with their baby's father and almost half (28, 49%) endorsed partners views as one item from a list of main factors determining their choice of child care (see Table 3). In further discussion these mothers generally talked about the partner's role as one of confirming their choice rather than having his own strong views:

"Me and Neill discussed it and we both agreed that (friend) Marion would be a very good choice." (18)

"We discussed it but he wouldn't have an overriding opinion one way or the other." (17)

"He'd have supported me in whatever decision I took provided he was happy it wasn't going to be detrimental to the children." (16)

"He's happy to go with whatever I say.... he's happy to accept my judgment." (24)

It may be that although these responses sound as if they describe male compliance (or even disengagement) they were perceived as supportive by the women. However four (6%) of the mothers clearly presented themselves as excluding the fathers from child care decisions:

"His (ex husbands) views didn't come into it at all." (37)

"If I hadn't liked his Mum it wouldn't have made any difference that he wanted her to look after him. Well we probably would have got a divorce! But I like Victoria so that made it easy. (38)

While only two (3%) mothers said that their partners had any direct influence on their choice of child care type or individual, and in one of those instances that had been with their previous child and was only indirectly relevant to the infant in question.

"He (husband) likes it that they go to nursery and that I work part time. I don't think he'd be happy with full time care." (36)

(With the first child) "My husband had a deciding factor. I never agreed anything until he'd actually seen the childminder himself and made up his own mind if he liked her or not. But with Sarah we'd already decided she should go to the same childminder." (20)

III. Living with their choices

In answer to direct enquiry in the closed choice questioning, almost all the mothers (53, 93%) said that the choice they had made at the beginning still felt right now the baby was established in child care. Nevertheless in the course of the interview more than half (31, 54%) volunteered uncomfortable feelings about some aspect of their current child care situation or working lifestyle. Themes included guilt (N=12) (specifically described as such by the respondents) about some aspect of the impact of the mother working on the baby's well being, anxiety about losing control of their baby's daily life and upbringing (N=10), and ambivalence about the balance they had struck between working and mothering (N=9).

1. Guilt

In one fifth of cases (12, 21%) mothers described some aspect or result of returning to work and using a child care provider as something they had done which was regrettable and about which they reported still feeling guilty. More than half these instances (7, 12%) were related to ending breast-feeding.

“Since I knew I'd soon be going back to work I stopped at a month. I wish I'd persisted though. He's got intolerance of cow's milk so he's on Soya. But when I stopped breast-feeding he went from crying with hunger to crying with pain. Also he's developed eczema, asthma and hay fever so half of me thinks if I'd carried on breastfeeding he might not have got all this.”(39)

“I really enjoyed breast feeding and I regretted having to stop. I suppose I felt that there was a bond being broken to an extent.”(7)

A few had felt guilty about specific incidents such as illness in which they thought that their absence might have been harmful to the baby:

“I got home as fast as I could but I felt agitated... we found out later he’d perforated an eardrum... I felt completely wretched and I still feel guilty because I wasn’t close enough to pick him up.”(40)

While others reflected a more general unease with the separation:

“I was concerned at leaving him at 5 months because I thought he was too little and I still, I still think, you know, I wish I hadn’t had to. I didn’t have to but you know...I’d feel happier to have waited.”(36)

“With my first, you see, I never did go back till he was 16 months cause I was terrified my son would think my mother was his mother and I couldn’t handle it. In the end with a second you realise they’re always going to know you’re their mother. But you do get the guilt. It’s very up and down isn’t it? One minute it’s fine and then if you’re feeling a bit down you get all this emotional guilt coming on to you.”(41)

2. Loss of control over the infant

Almost one fifth of the mothers (10, 18%) were concerned that, by losing time with their infants and allowing them to spend that time with other carers, they might lose overall control of how the infants were being brought up.

“I do miss not being at home with her, not being in charge. I hate it actually... I’d gladly give up right now if I had money.” (42)

“Beth doesn’t sleep there (at childminder’s house) like she does at home – she’s always struggling to stay awake and play with the big girl. She’s quite grotty when she comes home and sometimes needs an early evening nap before I put her to bed properly.” (5)

Some mothers reported giving detailed instructions, designed to ensure that the caregiver operated on their behalf rather than independently:

“I tell Lucy what Isobel is going to have for lunch and things like that. I like to know. One time – I know it’s really silly – but I told her to give her mashed banana and she gave it her in little bits instead. And I just said “do as I say in future” because I felt that the first time she has little bits of something I want it to be up to me.” (10)

Mothers’ feelings of wanting to maintain control were related in some instances to their working hours. Some mothers limited their hours away from the baby specifically in order to stay in charge:

“We both feel that we want to have some control. It’s the sort of age where you need to be in control of your life and your child and everything. Her being in a nursery sort of 4 or 5 days would be handing over control to other people.” (29)

Others were determined to avoid a caregiver who set herself up to know best about child rearing and might therefore undermine their authority:

“I wanted a nanny who’s a bit like me but not someone who’d try to take over my role.” (43)

“I wanted a childminder who wasn’t too dominant.” (44)

3. Ambivalence about work-home balance

When asked directly what would constitute their ideal work-home balance, many of the mothers said that their current arrangements were just right. Where they indicated possible improvements all but one of these were in the direction of spending less time at work and more at home, e.g. working two days rather than three, or leaving work earlier in the afternoon. In more general conversation, however, some of the women expressed not just uncertainty about details of their arrangements but definite ambivalence about their lifestyle (9, 16%). Some would have preferred to

work part-time, or start back when their baby was older, others wished they did not have to work at all, and these comments encapsulate the ongoing nature of ‘decisions’ about being employed and using child care:

“There are pro’s and con’s... I think originally we just thought that we would have a child and I would go back to work full-time and we would just almost carry on as we were... and financially we’d be better off. I don’t think we appreciated how tiring it would be and I don’t think I appreciated how much I would feel I would miss out if I did as well.” (29)

“I’ve always enjoyed teaching and being in the classroom, so I didn’t expect to feel that I could spend all day at home. I didn’t think I was the sort of person that could do that. But since Mark was 4 months old I realised that yes, I could. And that’s surprised me.” (7)

“I thought I’d sort of do a few months and see how I coped but now I’ve done three months of it, I think, I sort of know the (child care) hours are too long and I’m looking to review the whole situation for the rest of the year.” (14)

“In an ideal world I would take 6 months off... well I’d love to take a couple of years off (laugh) but I can’t. Nobody is forcing me; it was just the pressure and the investment in my career that was forcing me to go back really. I really would rather not have gone back to work.” (2)

DISCUSSION

Most of the women in this study had positive attitudes towards their employment. The desire to progress in their careers was influential in their decisions to return to work and to seek child care, closely mirroring the findings of Volling and Belsky (1993), in whose study of predictors of employment in the first year after giving birth, more than half the mothers said that their personal desire to develop their

career was an important factor in their decision to return to employment. However it must be kept in mind that we did not interview any women not currently working or studying in preparation for work. Thus it cannot be assumed that all the ideas and feelings expressed by these mothers are attributable to the fact of them being in employment and using non-maternal child care soon after the birth of an infant. Some feelings of regret, anxiety or guilt may be common to all new mothers, whatever their employment or child care status. Current arrangements felt right for most of these women, but it has been demonstrated, in the study overall, that more women wanted to remain at home with their child, and more who wanted to do this were able to achieve their goal (Barnes *et al.*, 2006). Thus some feelings expressed, rather than being an expression of overall contentment, may be a consequence of justifying their current circumstances to themselves, to their partner if he was present, or to the interviewer, to present themselves in the most positive light. The methodology used, - a semi-structured interviews that allowed the respondents to follow their own ideas - may make this particularly likely. The method was chosen so that unforeseen and unexpected themes could emerge, but it can be criticised for lack of comparability across interviews, and for the possibility that the interviewer might lead the respondent to discuss particular issues in more detail than others. This can be addressed to some extent in training but is always a factor to be considered with qualitative research. These interviewers were clinically trained, and briefed to avoid any indication of their own particular view of the subjects under discussion. Nevertheless, even the most experienced clinician may give inadvertent clues to his or her feelings about a topic.

That said, some interesting issues emerged. Financial factors were very important to the mothers in this sample, reflecting but also differing from earlier

findings from the USA. Where the need for money is mentioned by a large majority of most American samples (Pungello & Kurtz-Costes, 1999), it was mentioned in response to open-ended enquiries by only half of this English one. This may in part be because the sample of 57 whose in-depth interviews are the subject of this sub-study reflect the fact that mothers in England using child care in the first half year of infants' lives are likely to be those with higher status occupations (Sylva *et al* forthcoming). It may also be that the financial pressures felt by these mothers were somewhat mitigated by their statutory maternity rights. At the time these data were collected, all women in the UK, irrespective of their employment history, or any individual arrangements made by their employers, were entitled to 18 weeks maternity leave paid at 90% of normal wages for the first six weeks and £100 per week (the annual rate is set by government), for the remainder. Women did not have to name the date by which they would return to work in advance of the baby's birth, and could take a further period of unpaid leave without jeopardising their job security. Interestingly, while many mothers said that a need for money was their main reason for returning to work, and for some of them the end of paid maternity leave dictated the exact timing, no-one, including mothers who returned to work before that 18 weeks had expired, mentioned the differential between statutory maternity pay and their usual earnings. This may have been because more than half were returning to part time work and therefore to pay which may not have been dramatically different from their maternity benefit. Indeed two mothers mentioned that they and their partners had worked out that in strictly financial terms their families were no better off with the mother working than they had been during her maternity leave.

The conclusion of maternity leave had a bearing on job security and future prospects, as well as immediate income for the family and some degree of financial

independence for the individual woman. Some mothers thought that taking further unpaid leave, or not returning to their jobs at the date they had led their employers to expect, might jeopardise their employment. Some mothers who noted that they would not actually lose their jobs if they took further, unpaid, leave, indicated that they might nevertheless lose the right to return to their familiar workplace and be moved elsewhere.

A need for income and anxiety about job-security were not the only reasons for mothers returning to work when maternity leave ended. Personal fulfilment, mentioned by a majority of the mothers in O'Keefe's study (2002), was not mentioned as often by the mothers in this study as career-orientation, a factor that Himmelweit and Sigala (2003) saw as integral to the sense of identity of the 34 mothers in their qualitative study. In addition some mothers mentioned feeling a high degree of commitment to the actual workplace and the particular colleagues they had left just before the birth, and a determination to abide by any (informal) undertakings about returning to work that they had made while pregnant. This factor, which has not been reported in other recent studies, merits further research. Information volunteered by some mothers suggests that this type of staff loyalty is encouraged by employers who offer flexible and family-friendly arrangements and worker-friendly settings. Despite the small size of the sample these data do suggest that such employers may save on recruitment and training costs.

Mothers' reports of commitment to their jobs often overlapped with statements about their need for companionship that was not only adult but also baby-free. From the detailed responses of this small sample to open-ended questions, it seems that while some women on maternity leave had found sufficient social contacts and support amongst other women in a similar situation with babies, others felt the

need for adult relationships in which motherhood played no part. It would be interesting to know how general this differentiation is in a larger population of new mothers and whether it is shared by fathers.

Most women had discussed the advantages and disadvantages and the timing of their return to work with their partners, extended families and friends, but not many of them reported canvassing direct advice and opinions or acting upon any that were offered. It seems that most of these mothers were more likely to take up suggestions made by peers in the same situation as themselves than those made by health professionals or by their own mothers. As to fathers: when mothers were asked to select from a list of factors that had been important to their decision-making, the majority endorsed the fathers' views as important, but the qualitative comments reveal that most men were told what their partners planned and expected to agree. According to the women most did agree, or at least acquiesce, but it seems that if there been a difference of opinion, most of the fathers would have been ignored.

The findings of this study make little contribution to ongoing debate about the significance of infant characteristics in decisions about returning to work, or on the type of care selected. Very few of the women in this study mentioned that any infant characteristic, even gender, had a bearing on their decision-making. The exception was age. As in Fuqua and Labenson's (1986) study, some mothers said that they believed care by an individual (relative, child minder or nanny) was more appropriate than group care for such young children. The few mothers who mentioned temperamental issues, such as "clinginess" or "sociability", or infant characteristics such as a need for the companionship of other children, usually linked them to the infant's age and stage of development. In contrast to the findings of Galambos and Lerner (1987) mothers in this sample who did mention their infant's temperament

invariably stressed positive characteristics that had made it easier for them to return to work. Since the sample consisted, by definition, of mothers who returned to work before their babies were seven months old, there could be no comparison group of mothers who did not. However it is possible that study of a group of mothers who wanted to return to work during this age-period and felt unable to do so might find that infants' negative temperamental characteristics were important to that decision.

Although the mothers in this study spoke of getting information about child care from a wide range of sources, and finding both formal sources, such as leaflets, and informal ones such as friends, useful, very few said they had followed up by, for example, making visits to nurseries or contacting the Children's Information Service provided by each Local Authority in England. Mothers were asked when they had decided on the type of child care they would prefer. Most said that they had decided before their babies were born. According to these retrospective reports most mothers, like those in Shlay's very different sample of low-income African American parents (Shlay et al., 2006), had clear opinions about what constituted good quality care and had either decided that they wanted a nursery or that they did not want a nursery. Those decisions seemed to rest on pre-determined views, such as that nursery life was more stimulating and educational (a consideration for half of this group of mothers) and offered safety in numbers of caregivers, or conversely that nurseries were too impersonal and noisy for a small baby.

When the time came to consider implementing those early decisions most mothers said that they still felt right. Mothers who did not want to put their infants in nurseries because they thought small babies needed close, continuous care and a peaceful environment, opted for relative care if it was available or chose between childminders and nannies, largely on a basis of cost. However, in response to direct

questioning as well as open-ended enquiries about how they had made and thought through their decisions, it became clear that few of these mothers had any information about the registration and training of childminders or of the qualifications and job descriptions that differentiate a nanny from an au pair. Furthermore many of the mothers who did not want nursery care and might therefore have chosen non-familial individual care were concerned about issues of trust. Some mentioned possibilities of abuse or neglect (influenced in part by some dramatic television programmes) and the loss of control arising from not knowing what goes on “behind closed doors”; others worried that childminders might “just get on with their housework” or that nannies might “spend all day on the phone”. It is interesting that the very characteristics of nursery care that concerned some parents – such as relatively large groups of children and care by several adults – were reassuring to others.

When it came to looking for an actual caregiver or care setting, few mothers described themselves as being systematic, or guided by those earlier decisions that still “felt right”. Many left themselves little time to find a caregiver before they were due to start work. Some seemed to “fall into” a child care arrangement because a vacancy was available in a conveniently-placed nursery or care was offered by grandparents or other relatives, close friends or sometimes the daughters or childminders of close friends. As in Kontos’ (1995) study of mothers using family day care or relative care, these mothers eagerly sought out friends who knew, or knew of, any prospective caregiver and could give a verbal character reference. However, despite the widespread, media-induced anxiety in the UK about mistreatment in nurseries or by in-home caregivers (a BBC TV documentary about nurseries was shown during the study and the “Louise Woodward” case was ongoing in the USA and widely reported throughout it), very few said that they had checked back with

unheralded visits to nurseries, visited more than one child minder or taken up individuals' formal references. In a few instances au pairs were employed on the strength of an interpreted telephone call.

More than half of these mothers mentioned the kind of relationship they would like to have with their baby's caregiver but in response to open-ended questions a key issue of "ease of communication with the caregiver" emerged in addition to those that recur in the literature, such as "trust" and "warmth" (Pungello & Kurtz-Costes 1999). These detailed data from a small group of mothers support the finding of a large study of mothers using child care at 10 months in which easy communication, between caregiver and mother, was found to be strongly associated with satisfaction with child care (Barnes et al., 2006). In both studies mothers wanted to feel comfortable with their children's caregivers. It was not only that they wanted to employ somebody who would be warmly responsive to the infant (Cryer & Burchinal, 1997; Rassin *et al.*, 1991;), or that they wanted to avoid employing an individual who might try to supplant them, practically or emotionally, with the baby, but also that they wanted to feel a sense of adult acceptance and shared values.

Once back at work and with their babies settled into child care, almost all the mothers expressed themselves contemporaneously as satisfied with the choices they had made. It may be that for those who were using types of care that were different from those they had intended, feedback effects, as suggested by Pungello and Kurtz-Costes (2000) were operating. Nevertheless more than half of this group of mothers were ambivalent or anxious about their overall situation and lifestyle. Those who felt their work-home balance was not ideal would all have preferred fewer hours at work and more at home with the baby. Some of the mothers who were working full-time said that they would have preferred not to; several mothers who were working three

days a week volunteered a wish to work two days instead. Financial considerations did not enter into these statements of preference, perhaps because there was no prospect of realising them. Nobody mentioned the reduction in pay that would inevitably follow a reduction in hours and the only woman who said she would like more working time was a student with nothing to gain financially. Some women spoke of feeling anxious lest they lose their primacy as mothers; lose their primary bond with the baby or lose control of the details of their baby's daily life and upbringing. And a fifth reported that they lived with continuing feelings of guilt concerning either the physical or the emotional weaning of their child. The focus of the anxieties expressed by these mothers was being away from their infants. Given their very positive attitudes to work in general and to their own jobs and workplaces in particular, this level of distress is notable. Further research is needed to ascertain whether mothers who do not return to work during the first year of their infants' lives are less anxious overall or have equal levels of anxiety focused on different issues.

This study has several limitations. The sample size is small and biased towards mothers with higher educational qualifications, and many were in professional occupations to which they were highly committed. Those who agreed to be interviewed were also more favourable in their views of the consequences to children of maternal employment. While this reflects the pattern of early use of child care in the FCCC study (Sylva et al., 2006) it would be interesting to learn more from mothers who have used non-maternal child care in the first months of their infant's life for reasons related to hardship. In future research it will be important to discuss the issues covered here with mothers from a broader range of backgrounds, and also with those living in different locations (for instance rural areas) where there might be particular issues surrounding the choices of child care. Finally, because most were

employed during the day, many of the women were interviewed in the evening with their partner coming in and out of the room, if not present for the whole interview. Thus any comments about partner involvement in decisions might have been different if there had been complete privacy. Nevertheless, some conclusions can be drawn.

CONCLUSIONS

The combination of quantitative and qualitative, retrospective and contemporaneous data from these interviews has highlighted the complexity of issues around early child care and the importance of multi-method research to which the factorial survey method adopted by Shlay (Shlay et al., 2006) is a welcome addition. As in Bogat and Gensheimer's (1986) study these mothers frequently gave very different answers "in general" to those they gave "in particular". For example, from a list of what was important to them when choosing a type of child care, almost all endorsed "partner's views" but when discussing their choice of a particular caregiver or setting in response to open-ended questions, a small proportion made it clear that the views of partners were largely taken for granted and sometimes ignored. Possibly some fathers were unable to make visits to potential child carers and mothers then felt that the decision making fell to them by default. The issue of the role of partner's views is not resolved in this study and merits further exploration, using separate interviews with mothers and fathers.

As in Atkinson's (1987) study, this research found that complex reasons for choosing, say, nursery care "in principle" were often abandoned in practice, and a different type of care setting chosen by simpler criteria such as convenience and location. It seems that if we are to understand how parents actually select child carers

and settings, and if policy-makers and providers are to provide child care services to fit with parents' plans and preferences, questionnaire data alone are not enough.

One of the aims of this study was to explore mothers' information and beliefs about different types of non-maternal child care; where that information came from and the decision-making processes by which they chose child care arrangements for their infants. From lists of sources of information mothers cited as useful a wide range, including printed materials (leaflets, magazine articles) as well as direct communication with health professionals and with family and friends. However spontaneous comments made it clear that mass media, especially TV, played a large part in shaping their beliefs and that the images of child care that TV conveyed and mothers retained were almost invariably negative. Widespread coverage of rare instances of abuse or neglect is probably inevitable, but if such exposure is in the public interest, it would be helpful if media could be persuaded of their responsibility to balance it with coverage of much more commonplace examples of good practise.

The information mothers in this study had acquired about types of child care had remarkably little bearing on the actual care-arrangements they made for individual infants, sometimes opportunistically and often for personal rather than professional reasons. These results indicate a real need for proactive local advice services, and registers of vacancies that parents can easily access well in advance of the date from which they need child care. The readiness of some parents to accept child care from a relative or friend because she is "family" or "known", rather than from a childminder because she is "a stranger", shows that families do not necessarily think about the importance of a home receiving regular safety checks, or an individual being police-checked. Furthermore the fact that many parents do not seek or take up

references for nannies or au pairs is of concern since currently in the UK neither group is registered or inspected.

Although these results are derived from interviews with a relatively small group of mothers, they nevertheless suggest some interesting policy points. There seems to be a need for more parental education concerning both the characteristics and the importance of high quality child care whatever its setting. Such a programme could usefully be shaped to include accessible information concerning attachment. Some mothers in this study suffered unnecessary distress because they feared that losing time with their infant might also mean losing their prime position as mother. In some cases their child care choices were influenced by a desire to avoid competition with a caregiver for dominance in the infant's practical or emotional life. Helping mothers to be more confident of their own central place in their infant's world might relieve some distress, open up a wider range of child care options for more careful consideration and enable some mothers to be more encouraging of fathering.

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Table 1. Characteristics of participants (N=57)

Maternal age (mean)	32.0 years(range 19.5 to 38.1)
Age of infant at return to work (mean)	4.5 months(range 2.0 to 6.5)
Mean hours using non-maternal child care	32.1(range 12.0 to 52.4)
Family type, two parent family	52 (91.2%)
Child gender, boy	31 (54.4%)
Birth order:	
First	33 (57.9%)
Second	21 (36.8%)
Third or fourth	3 (5.3%)
Occupational status:	
Managerial/professional	45 (78.9%)
Intermediate	6 (10.5%)
Working	6 (10.5%)
Employment arrangements:	
Full- time	22 (38.6%)
Part-time	29 (50.9%)
Student	6 (10.5%)
Place of employment or study:	
Outside the home	50 (87.7%)
At home and outside	5 (8.8%)

At home	2 (3.5%)
Minority ethnic group	7 (12.3%)
English not first language	5 (8.8%)

Table 2. Frequency of use of different types of non-maternal child care, mean hours and dominant single type of care (N=57).

Child care type	N (%)	Mean	Min.	Max.	Dominant
		hours¹			type²
Childminder	14 (25)	32.4	16	45	15 (26)
Nursery	10 (18)	29.5	16	48	11 (19)
Nanny	8 (14)	29.9	14	50	12 (21)
Combination	13 (23)	33.2	12	50	N/A
Grandparent	8 (14)	34.2	20	53	14 (25)
Relative/friend	4 (7)	33.8	15	45	5 (9)

- 1 No significant differences between types in the mean number of hours .
- 2 Infants were considered to be in a combination of child care types if two non-maternal types were being used for a total of 12 or more hours per week. The dominant type was defined for those with combined care as the one used for the most hours per week.

Table 3. Sources of information about child care, individuals with whom discussion took place, and influences on final selection (N=57; alternatives in each column are not mutually exclusive).

Sources of information	N (%)	Discussion	N (%)	Influenced final selection	N (%)
Health visitor	18 (32)	Partner	49 (86)	Availability	39 (68)
Leaflets	17 (30)	Own mother	29 (51)	Location	36 (63)
Print media	15 (26)	Friends	22 (39)	Partner's views	28 (49)
Friends	13 (23)	Relatives	21 (38)	Cost	26 (46)
Help line	10 (18)	Other mothers	17 (30)	Recommendation	23 (40)
Mother/baby group	10 (18)	Work colleagues	13 (23)	Facilities in own home	14 (25)
Family	7 (12)	Health professional	10 (18)	Stories in media	13 (23)
Television	6 (11)			Work child care provision	4 (7)
Antenatal class	4 (7)				

Table 4: Coding framework for thematic analysis of the decision to return to work and/or use child care (N=57)

Higher order Codes	N (%)	Lower order codes	N (%)
Contextual	35 (62)	Maternity leave	20 (35)
		Work pressure, responsibilities	11 (19)
		Job security, fear of losing job	5 (9)
		Child care available	4 (7)
Financial	27 (47)	Income needs of family	26 (46)
		Financial independence for mother	3 (5)
Maternal	33 (58)	Career orientated	21 (37)
		Relationships out side motherhood	18 (32)
		Enjoy work	6 (11)
Infant	7 (12)	Separation from mother	4 (7)
		Social interaction, enjoys care	3 (5)
		Temperament	2 (4)

Table 5: Coding framework for thematic analysis of the decision to use a particular type of child care (N=57)

Higher order codes	N (%)	Lower order codes	N (%)
Practical, contextual	50 (88)	Convenience	36 (63)
		Availability	33 (58)
		Cost	25 (44)
		Care was offered	18 (32)
		Flexibility	13 (23)
Attributes of carer	52 (91)	Personality or attitude	27 (47)
		Familiar/family	25 (53)
		Experienced	24 (42)
		Related well to infant	23 (40)
		Qualified/accredited	11 (19)
		'Mother figure', nurturing care	10 (18)
Attributes of care setting	43 (75)	Adult:child and group size	29 (51)
		Provision of learning and/or social experiences	28 (49)
		Safe	17 (30)
		Healthy	11 (19)
		Home environment	11 (19)
Wider contextual influence	40 (70)	Advice from others	24 (42)
		Experience with siblings	14 (25)
		Media	14 (25)

Mother/carer relationship	31 (54)	Comunication	20 (35)
		Trust	18 (32)
		Shared values	15 (26)
Child factors	19 (33)	Age	15 (26)
		Emotional well-being	7 (12)
Father/partner	12 (21)	Supportive role	10 (18)
		Views irrelevant	4 (7)
		Views incorporated	2 (4)