A PHENOMENOLOGICAL STUDY OF THE PERINATAL EXPERIENCES SHAPING A WOMAN'S IDENTITY IN ACADEMIA

by

Elizabeth Catherine DeBolt

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Philosophy

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Abstract

The purpose of this qualitative hermeneutic phenomenological study was to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect the integration of their academic and maternal identities and outlook on continuing in the academy. The theories guiding this study were Mercer's theory on becoming a mother and Bronfenbrenner's bioecological model. The study was comprised of 10 women who became a mother with their first child within the last seven years of the study's initiation while holding a faculty position in academia that included teaching, scholarship, and service responsibilities while pregnant and during the first nine months postpartum. Data collection methods included questionnaires, semi-structured interviews, and a letter-writing exercise. Data analysis was founded upon van Manen's hermeneutic approach and supplemented by Saldaña's data analysis and coding methods. Through cyclical coding and condensing, the data was organized into five major themes and sub-themes to capture the essence of the participants' perinatal experiences in application to the study's central and sub-research questions. Among the findings, two crucial implications included the need participants had for supportive relationships and institutional policies during the perinatal period, along with a recognition of the dynamic changes that occur in one's identity of becoming a mother.

Keywords: mother, academia, identity, perinatal, women, career

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Dedication

Above all others, I dedicate this study to my Lord and Savior, Jesus Christ. Each time that a door felt like it was closing, it was God who opened another path and gave me the fortitude to continue. Without question, the aim of this research is to better the lives of others, and I sincerely pray that God will be glorified through it all.

I dedicate this study to my husband, or more appropriately, my hubby, Clay. The sacrifices you have made to help me achieve this are too numerous to list. You have loved me through the emotions that come with pursuing a Ph.D. and listened to countless discussions on topics that meant nothing to you, yet because they mattered so much to me, they mattered to you. You have cared for our children night after night to facilitate the time I needed to bring this study to fruition. Clay, you are my best friend and a model of what it means to love sacrificially. This is our accomplishment.

I dedicate this study to my children, Karis Grace, Abigail, and Nehemiah! I will never forget your nightly prayers that God would help Mommy to get her dissertation! Guess what, babies, here we are! You three are why I work hard; you three give me more joy in my days than I thought possible. Despite the trials that came with juggling your home education while also pursuing a Ph.D., I will never regret the extra time I have had with each of you. You three will also be my priority.

Karis Grace, your heart for others and your family is absolutely beautiful. You are tenderhearted, feel deeply, and are generous and compassionate to everyone you meet. Your smile stops me in my tracks and always uplifts my soul! Let your light always shine; you will do amazing things! I love you!

Abigail, you have been my cuddle bug from day one, and your snuggles have encouraged my weary heart along this journey. You are bold, witty, brilliant, and creative; never be afraid to be the person God has called you to be. I love you!

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Mom, you always told me I could do anything I wanted to. When I wanted to start college early, you never held me back. You cheered me on when I was discouraged and felt alone in a male-dominated discipline. When I pursued academia while simultaneously starting a family, you encouraged me. I am forever grateful for how you have loved my growing family and me. We love our Suesu, and I am thankful to know I have you on standby to cheer me on in what God calls me to do next!

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List of Abbreviations.

Becoming a Mother (BAM)

Bioecological Model (BM)

Central Research Question (CRQ)

Family Medical Leave Act (FMLA)

Institutional Review Board (IRB)

Maternal Role Attainment (MRA)

Perinatal Anxiety (PPA)

Perinatal Mood and Anxiety Disorder (PMAD)

Perinatal Mood Disorders (PMD)

Process-Person-Context-Time Model (PPCT)

Qualitative Data Analysis Software (QDAS)

Stop the Clock (STC)

Work-Life Balance (WLB)

Work-Family Conflict (WFC)

Work-Life Integration (WLI)

CHAPTER ONE: INTRODUCTION

Overview

The role of women in academia has progressed throughout the past century and represents an ever-growing component of faculty demographics in today's academic institutions. As time has progressed, the institution of academia has included not only women, but women who are both academics and mothers. While the literature notes the progression of women in academia and the unique barriers they face in a historically male-oriented field, for women who become pregnant while pursuing a career and identity in academia, what is considered a major life transition for a woman (McQuillan et al., 2008), can become a liability to the mother's academic career (Carver, 2005; De Marneffe, 2019; Esnard et al., 2017; Goode, 2000; Raddon, 2002; Wolfinger et al., 2008). The ways in which women experience the academy during the perinatal period is where a gap in the literature exists. The perinatal period, which encompasses pregnancy and the first year postpartum, is a time in which women experience changes in nearly every physiological and psychological domain (Athan & Reel, 2015; Javadifar et al., 2016). Yet, there is a gap in the literature exploring how mothers experience the academy during the perinatal period and how these experiences affect the woman's academic and maternal identity. This first chapter provides an overview of the historical, social, and theoretical contexts that lead to the problem of study. The chapter concludes with an examination of the study's purpose and significance, which is addressed through the study's guiding central and sub-research questions.

Background

This chapter briefly examines the historical background of women in the American workforce and the women's rights movement, which significantly influenced the opportunity for women to pursue faculty careers within higher education, or as referred to, moving forward, the

institution, academy, or academia. The institution of academia is briefly overviewed as it provides context to understanding women's position within the institution, leading into the social context of mothers in academia. The theoretical framework follows, providing a base for examining the literature on mothers' perinatal experiences within academia and how such experiences affect their identity and their outlook on continuing in the academy, for which there is a paucity of research.

Historical Context

Women within the American labor force have historically challenged societal norms of the day (Adrian Hodges Advisory Ltd, 2017; Brusentsev, 2006; Goldin, 2006; LeanIn.Org & McKinsey & Company, 2022; Webb, 2010; Wulfhart, 2023). In the early 20th century, women's work occurred primarily within the home and family-operated income-producing functions, which received little validation in the discussion of women's work (Goldin, 2006; Janssens, 1997; Shorter, 1976). Women who did enter the labor force were professionally limited due to the opportunities afforded to earn a higher education during the mid-19th and early 20th centuries (Parker, 2015). In the years following the women's suffrage movement, there were notable increases in women's participation in higher education, predominately in women-only institutions (Parker, 2015), a pursuit dating back to the work of Wollstonecraft (1792), whose feminist work drew attention to the positionality of education in seeking women's equality with men. There were also notable increases in participation of married women in the workforce, growing from 14% in the 1940s to 31% by the 1960s (Waite, 1976).

While the women's rights movement was instrumental in bringing to light the inequalities experienced by American women prior to the 1970s (Janssens, 1997), it was not until the second wave of feminist movements brought forth in the 1960s and 1970s that the gendered stereotyped

conceptions and limitations of women's abilities and sexuality began to be confronted head on. Through the work of Friedan (1963), the societal stereotype of women's roles was challenged, recognizing the interwoven nature of culture and politics upon women's inequalities. Concurrently, Peterson led a collective of women who rallied for what became the Equal Pay Act of 1963, in which women were to legally receive the equivalent composition as men for performing equivalent work (McGuire, 2018). However, these efforts were often one-sided and broad, working towards a reformation of equalities that neglected the comprehensive rights of women. One such example can be seen in the Title VII civil rights act, which was passed to prohibit workplace discrimination based on sex, and while this was a step in the right direction, the act completely neglected a crucial part of sex, which is the ability to reproduce (The U.S. Equal Employment Opportunity Commission, 2008). Thus, this act failed to provide an antidiscrimination policy that included pregnancy, perpetuating a lack of comprehensive rights for women. Furthermore, these late 20th century movements continued to be racially discriminatory, as the rights of Caucasian women were uplifted to the neglect of women of differing races and ethnicity (Crenshaw, 1989). This one-sided position of equality fell short of equality of opportunity, coming up shy of achieving the inherent purpose of elevating all women, including working mothers.

It was with the onset of the 1970s that a shift in the composition of women in the workforce occurred, as 1/3 of mothers who cared for at least one child under the age of six were now employed (Waite, 1976). During this era, women also began to gain control over their choice and timing of motherhood through the conventions of affordable and effective oral contraception (Sauer, 2015). In conjunction, during this time, Ivy League schools began allowing women to attend, though it was often met with great resistance (Malkiel, 2017; Parker, 2015). It

was on the heels of the 1972 Title IX act that mothers entered the world of academia, and women academics found themselves taking on the role of mother (Amsler & Motta, 2019; Leonard & Malina, 1994; Mason & Goulden, 2002). It was not until the end of the 1970s and early 1980s that women's rights were comprehensively addressed through the Women's Bill of Rights. In this bill, the United Nations legally bound signatory governments to cease all forms of discrimination against women, both in private and public sectors of life, seeking equality among genders from the macrosystem to the microsystem (U.N. Women United Nations, 2023). The university teaching profession was challenged by the numerous women's rights movements that progressively broke down gender barriers, leading women into academia (Helgesen, 1990).

Academia, also known as the ivory tower (Bavishi et al., 2010; Rawlins, 2019), is a unique culture (Smerek, 2010). Academia was founded as an elitist and distinct profession constructed by men for men, which continues to convey that its faculty be comprised of the ideal worker whose complete devotion is to that of the academy (Bailyn, 2003; Fox Tree & Vaid, 2022; Gregory, 2021; Hunter & Leahey, 2010; Quinn et al., 2004; Savigny, 2014; Sokoloff, 1992; Ward & Wolf-Wendel, 2012; Ysseldyk et al., 2019). However, as social, political, and cultural reform occurs over time within society, the structural hierarchies and organization of historical institutions, including academia, have also experienced reform and evolution (Bleiklie & Powell, 2005). Historically an institution of knowledge, academia continues to evolve into a corporate operation model (Bleiklie & Powell, 2005; Isgro & Castañeda, 2015) as the academy takes on a neoliberalism restructuring (Huopalainen & Satama, 2019; Macfarlane & Burg, 2019). The neoliberalism view promotes a corporate culture that may often abrade the space for pedagogical significance, creative musings, autonomy, and may even clamor for space that should be given to the care of both the academic and their relationships (Amsler & Motta, 2019;

Ball, 2015; Gilbert et al., 2022). This culture also views motherhood as a significant obstacle to a woman's success within academia (Mason et al., 2009; Maxwell et al., 2019; McDermott, 2020; Ollilainen & Solomon, 2014; Rudd et al., 2008) and even to her hiring and perceived capabilities (Correll et al., 2007; Gangl & Ziefle, 2009), with the institutions of motherhood and academia at odds against the other (Coser, 1974).

Social Context

As mothers in the workforce transition postpartum, they often contend with uniquely gendered caregiving challenges that affect their work. Of those challenges, childcare is often at the forefront. Historically, childcare has been a component of culture that was often informal and supported through family members (McCartney, 2006), enabling women's work (Weisner et al., 1977). Though at the turn of the industrial revolution, the methods for childcare began shifting, with women employing various methods of care, including bringing their infants to their place of employment to care for them as they worked (Reynolds, 2018). As the need for childcare support has grown with maternal employment, so have the models for childcare, which vary in degree from foundational childcare to the inclusion of primary education methods. More frequently, both models collaborate in today's childcare facilities which are predominately privately marketized (Havnes & Mogstad, 2011; McCartney, 2006). The relationship between the use of childcare and maternal employment is often related to the economic earnings of the mother, of which higher income frequently leads to higher and longer childcare enrollment. Consequently, for higher educated women, the relationship between the hours spent in childcare during the first five years of the child's life, and the mother's earnings when the child reaches 1st grade, are interrelated and correlate to higher maternal earnings (Bub & McCartney, 2004), making

childcare a prime asset to addressing career progression among academic mothers (Willey, 2020).

Many European policymakers recognize the investment in childcare systems as crucial to society's economic growth and equality, investing in universal childcare systems (Bousselin, 2022) Nevertheless, even in the discussion of childcare, there is an implicit sexist approach as society views such as a woman's issue, rather than a family or parental concern (Savigny, 2014). Despite progressive societies addressing childcare universally, such remains elusive in the United States and is a "private headache" sporadically addressed by political and economic stakeholders (Gormley, 1995). As of 2022, only 8% of employers in the United States offered some form of childcare assistance (Ranji et al., 2022). Therefore, one of the foremost cited challenges for working mothers of young children is inadequate childcare (Hillier, 2021; Novello, 2022; Poduval & Poduval, 2009; Ysseldyk et al., 2019). Therefore, to meet the needs of crucial childhood developmental stages, a woman may, by necessity, need to adjust her workload or working hours or assume a position with less pay and prestige to fulfill the caregiving responsibilities of the family (Gangl & Ziefle, 2009; Gregory, 2021; Parker, 2015; Wolf-Wendel & Ward, 2006). In so doing, a narrative may be assumed that a mother's scaling back upon her workload is a preference or choice, when it may be due to a lack of adequate and affordable options (Gregory, 2021).

Of the women who take family leave following the birth of their child, 25% resume their paid-labor positions within two months postpartum (Falletta et al., 2020), with the average leave due to a new child being 54 days (Herr et al., 2020). Two months is also the most common time period in which women report the majority of health problems following birth (Declercq et al., 2014). One-third of women return to work within three months, which coincides with the fourth

trimester, between birth and 12 weeks postpartum (Poduval & Poduval, 2009). The fourth trimester is a critical time following birth for bonding with the baby while healing and transitioning physiologically, psychologically, and sociologically (Coombs, 2021; Declercq et al., 2014; Falletta et al., 2020; Tully et al., 2017; Whitney et al., 2023). Given the crucial healing and infant development during the fourth trimester, nationalized policies ensuring paid maternity leave exist in all countries except the United States, Papua New Guinea, and Suriname (Jou et al., 2018). The United States' current position on maternity leave can be seen through the Family and Medical Leave Act (FMLA), which stipulates the amount of unpaid time an employer must provide should both the employee and employer meet the minimum requirements. The FMLA does not require paid leave; for full-time working women, only 51% of employers provide some level of paid parental leave (Ranji et al., 2022). However, more than 45% of women in academia express that parental leave policies were an important aspect of their current choice of faculty positions (Morgan et al., 2021). Furthermore, only 39% of higher education institutions provide paid parental leave to biological mothers (Fuesting & Schmidt, 2021). Aside from paid leave, during pregnancy and following childbirth, women may need modified duties, in which their roles of service, research, and teaching are temporarily adjusted. However, only 18% of institutions, the majority of which are research institutions, offer a policy on formal, modified duties (Hollenshead et al., 2005). As a result of the perceived pressure to minimize leave, women may take a shorter parental leave, the results of which are compounding adverse effects on maternal mental and physical health and the infant's physical and cognitive health (Whitney et al., 2023; Willey, 2020).

When a woman re-enters the workforce after her child's birth, she may, by necessity, have to carry over her responsibilities of infant childcare while at work through the time-bound

need to pump for her infant within the workplace. Breastfeeding and pumping are topics of interest in the literature on infant nutrition, physiological health, cognitive development (Raub et al., 2018; Stuebe, 2009), mother-infant bonding (Radzyminski & Callister, 2016), and maternal confidence (Dennis, 1999). The importance of facilitating breastfeeding for working mothers has also been promoted and upheld by congress (Barton et al., 2019; Mitchell-Eaton, 2021; U.S. Department of Labor, 2023; Ysseldyk et al., 2019). However, along with the physiological demands of pumping at work, women often feel the pressures and undue employment critique accompanying this maternal responsibility (Stewart-Glenn, 2008; Wyatt, 2002). In comparison to European countries, which have higher levels of breastfeeding duration and subsequently also provide lengthier, paid maternal leave (Grice et al., 2011), the United States has a high level of cessation of breastfeeding when mothers return to work (Gielen et al., 1991; Tsai, 2022), which may further confound the challenges working mothers face in equality and inclusivity with academia.

As academia seeks gender equality and inclusivity, it is crucial to address the challenges women, specifically mothers, face in academia (Rosa & Clavero, 2022; Van Veelen & Derks, 2022). The need for such examination is also important for the institution's success, as gender diversity among faculty and administration is correlated to growth in nearly every domain of institutional progress and success (Abdul-Raheem, 2016; Bernard Hodes Group, 2008; Fox Tree & Vaid, 2022). The ideology of a woman's role as a mother also comes into function as the pendulum swings between ideas of women pursuing work in organizations such as academia and the role of a mother within her home as the primary caregiver (Benschop & Brouns, 2003). Mothers who choose to pursue a career in academia are met with both societal and institutional assumptions and expectations (Acker, 1990; De Marneffe, 2019; Hennekam et al., 2019; King,

2008; Raddon, 2002), which must be addressed and negotiated in order to overcome the barriers imposed by each of these institutions (Goodwin & Huppatz, 2010; McCutcheon & Morrison, 2016; Wolf-Wendel & Ward, 2006; Ysseldyk et al., 2019).

Not only are there paradoxical views of mothers in academia, but the maternal assumptions of society itself, especially to working mothers, are paradoxical, as seen in the paradigms of combative mothering (Moore & Abetz, 2018), essential motherhood (DiQuinzio, 1999), liberated motherhood and intensive mothering (Hallstein, 2006; Harding et al., 2021; Hays, 1996; Maclean et al., 2021), among the many assumptions and expectations placed on mothers (Coogan & Chen, 2007; Moore & Abetz, 2018). These perspectives contented for an either-or position of motherhood and work, a position that may even be propagated through the imposed assumptions of working women without children. Working women may have a romanticized ideal of intensive motherhood, which is assumed to be incompatible with the working woman's identity and life goals (Maher & Saugeres, 2007).

Yet, the idealized definition of good mothering evolves through the very practice of motherhood as negotiations of identity and life goals occur (Maher & Saugeres, 2007). A paradoxical view worthy of further exploration is the ability of motherhood itself to foster the success of a woman's academic role, shaping it in constructive and meaningful ways that may be unlikely to occur through any other form (Dickson, 2018; Huopalainen & Satama, 2019; Mazak, 2019). However, research often shows that in academia, personifying the identities of both mother and academic can lead to sidelining and opposition in career progression (Crittenden, 2002; Faludi, 1991; Kiester, 2022; Treviño et al., 2018; Verniers & Vala, 2018).

This study proposed that through a better understanding of the perinatal experiences of mothers in academia, the social barriers that hinder women in their professional and personal

roles may begin to be uncovered. Uncovering these barriers may foster an understanding of the societal and academic institutional assumptions that working mothers face in the academy. It is through the unearthing of how a woman's motherhood and academic roles affect their maternal and academic identities that the continued social progression of women in academia may be achieved (Castañeda & Isgro, 2013; Dickson, 2018; Pillay, 2009; Rockinson-Szapkiw et al., 2017; Ysseldyk et al., 2019).

Theoretical Context

Based on the historical and social contexts of women and their bearing children under the institution of academia, the need to further the research on mothers' experiences within academia is imperative (Ward & Wolf-Wendel, 2012). The study of women in academia, though examined through various frameworks, is most notably discussed through feminist theory and research, understandably, given the political and social frameworks that opened women's opportunities to academia. However, despite this progress, a separation between the genders continues to be noted through the lingering tensions of institutional norms and expectations defined by gender (Bird, 2011; O'Meara et al., 2017; Wolf-Wendel & Ward, 2006). Given the continued need to address multilevel gender inequality gaps in academia (Boring, 2017; Cardel et al., 2020; Kim et al., 2022; Krawczyk & Smyk, 2016; Marken, 2022), it is fitting that the primary theory for this study would be feminine and provide a specific framework for mothers' experiences and identity development during the perinatal period. Mercer's (2004) theory on becoming a mother (BAM), accompanied by Bronfenbrenner's (1979; 1999; 2005) revised bioecological systems theory (Bronfenbrenner, 2005; Miller, 2011), support the research for this study.

Mercer's (2004) BAM theory identifies the cognitive stages of a woman's psychosocial development that leads to her maternal competency and acceptance of her identity (Copeland &

Harbaugh, 2004; Mercer, 1985; Sleutel, 2003; Thornton & Nardi, 1975). However, the mother's experiences of BAM do not occur within a vacuum; rather, they are interconnected and bidirectional within the varied levels of her ecological system (Blackstock et al., 2022; Tiedje et al., 2002). Within the ecological system, the academic institution formerly resides within the mother's mesosystem. However, the work of an academic notoriously is without bounds (O'Meara et al., 2019) and thus, is a proximal process which directly influences the most personal aspect of a woman's identity, occurring within the crucial and personal level of her microsystem (Shelton, 2018). For these reasons, the use of BAM and Bronfenbrenner's (2005) bioecological systems theory were applied to examine women's perinatal experiences within academia, as experiences in one aspect of a woman's identity may affect her development and well-being in the other. Through this study, the two identities of mother and scholar, which could be considered opposing identities (Ysseldyk et al., 2019; Young, 2015), were examined during this transitional perinatal period of a mother's life.

Problem Statement

Despite the barriers women have historically faced in obtaining a terminal degree, as of 2020, 53.1% of doctoral degrees were awarded to women, exceeding that of men by 6.2% (Zhou & Gao, 2021). However, more men than women achieve high-level academic careers despite equal qualifications (Cardel et al., 2020; Kotini-Shah et al., 2022; Schneider et al., 2011; Van Veelen & Derks, 2022). For women who pursue an identity in academia (Phillip et al., 2022), there exists a phenomenon of women either opting out or leaking out of the academy (Habicht, 2022; Nielsen, 2016; Shreffler et al., 2019). This phenomenon largely centers around gender biases and the roles attributed to women who have families (Gappa et al., 2007; Goulden et al., 2011; Habicht, 2022; Wolfinger et al., 2009). As such, many women in academia choose to

postpone motherhood, opt out of motherhood, or change their career goals due to the birth of a child (Barbu et al., 2022; Goulden et al., 2011; Mason et al., 2009; Shang & Weinberg, 2013; Ysseldyk et al., 2019).

For women who become pregnant and give birth while in academia, these changes, coupled with their academic identity, bring about distinct challenges in their transition to becoming a mother (Javadifar et al., 2016; Nelson, 2003; Raphael, 1973). Furthermore, balancing work and family can lead to conflicting responsibilities that lead to stress and burnout, giving way to dysfunction and a propensity for mental health disorders (Ladge et al., 2018; Zheng et al., 2022). Given the rapid physiological and psychological transitions that mark the perinatal period of a woman's life, preemptively addressing the implications of a woman's academic work and its affects on this period of her life is critical (Falletta et al., 2020). Furthermore, the factors mentioned above can affect a mother's progression through the various stages of becoming a mother, stages that affect not only her personal identity, but also her professional self (Athan & Reel, 2015; Rose, 2020). Therefore, for the literature, and consequently, the policies and practices that shape academia to more comprehensively address the transitions and experiences of mothers in academia, the transitions of BAM during the perinatal period are of particular interest. Furthermore, Meleis et al. (2000) noted that the type of transition is crucial to understanding the effects; therefore, the perinatal transition of motherhood carries implications into the later years of motherhood (Williams et al., 1987). The problem is there is a lack of understanding of how the perinatal experiences of women faculty in academia affect their identities and outlook on continuing in the academy.

Purpose Statement

The purpose of this hermeneutic phenomenological study was to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect their maternal and academic identities and outlook on continuing in the academy. For this research, perinatal experiences were defined as the lived experiences encompassing the prenatal period through the first year postpartum (Moyer & Kinser, 2021). Becoming a mother is defined through Mercer's (2004) BAM theory, which denotes transitions that lead to maternal confidence and a woman's maternal identity. The modern terminology of matrescence (Athan & Reel, 2015; Raphael, 1973) encapsulates this process of BAM. It is these experiences and their connection to the mother's academic and maternal identity that this study sought to solicit in order to gain an understanding of the experiences of BAM within academia.

Significance of the Study

The literature shows that the process of BAM carries distinct experiences and the need to reconcile one's identity and roles (Guy & Arthur, 2020; Ladge et al., 2018); this study has examined the application of Mercer's (2004) BAM theory to mothers in academia. This study explored how BAM may affect a woman's academic identity and, in turn, her outlook on her academic career. Additionally, this study has recognized the influences of the academic institution as a part of the mother's ecological framework, and how the academy may affect how a mother processes through the perinatal period of matrescence (Hagelskamp et al., 2011).

The implications of this study were to better understand how the transition into motherhood affects a mother when viewed under the umbrella of the academy. Through hermeneutic phenomenology, this study solicited the lived experiences of mothers in academia to provide rich, insightful connection that expands upon the pre-existing literature of mothers'

experiences in academia. The chosen methodology sought to describe the phenomenon's essence and potentially confirm or challenge the existing findings on motherhood in academia while furthering the literature on the experiences of academic mothers during the critical perinatal period (Javadifar et al., 2016).

It has been noted that the academy is steeped in tradition (Murray, 2008) and slow to adapt to change (Dailey-Hebert & Dennis, 2014). However, with the changing geography of gender represented in academia (Isgro & Castañeda, 2015), this study may reveal that the system is limited in its equality of whom it accepts and who can excel (Benschop & Brouns, 2003; Buller, 2012). Through the participants' lived experiences, the constraints of motherhood noted in the literature were brought to light at the formational years of early motherhood, opening dialogue and opportunities for academic institutions to address ways in which women scholars can be supported in their identities as both mother and academic. This study also sought to better the experiences of future academic mothers by providing insight into the perinatal experiences and the institutional structures that uniquely affect mothers in academia.

Research Questions

The following research questions were used to solicit the participants' experiences, fostering a rich and deep discussion of the phenomenon. The central research question grounded the aim of the study. The sub-questions guided the study to foster data saturation, leading to a deeper understanding of the central research question.

Central Research Question

What are the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identity?

Sub-Question One

How do a woman's academic identity and professional pursuits affect her experiences and perceptions of becoming a mother?

Sub-Question Two

How do the experiences of becoming a mother affect a woman's academic identity and professional pursuits?

Sub-Question Three

What support systems foster the well-being of a woman's transition into becoming a mother within academia?

Definitions

Pertinent terms are defined below to clarify the terminology used within the study.

- 1. Becoming a mother (BAM) theory Mercer's (2004) theory on maternal role attainment denotes the transitions and challenges women progress through as they solidify their maternal confidence and identity.
- Contingent faculty Faculty holding non-tenure-track positions such as postdocs, teaching assistants, adjuncts, instructors, clinical faculty, lecturers, part-time faculty, and non-senate faculty (AAUP, 2018).
- 3. *Leaky pipeline* A mental image of the entry to a pipeline that begins with a large pool of qualified women scholars, which should flow smoothly to higher ranking positions, including tenure, and yet as the pipeline extends toward advanced career levels, women leak out (Alper & Gibson, 1993; Cardel et al., 2020; Wolfinger et al., 2009).
- Maternal confidence A mother's perceptions of and belief in her ability to understand
 her baby's needs and to provide apt skills to meet such needs for care (Arante et al, 2020;
 Badr, 2005).

- 5. *Matrescence* The transformative psychological and physiological process of a woman becoming a mother (Babetin, 2020).
- 6. *Neoliberalism* Universities that lean toward a corporate culture of academics, emphasizing faculty's competitive economic worth and the standardization and quantification of productivity measured by institutional conceptions (Yin & Mu, 2023).
- 7. Opting out The phenomenon of women exiting academia (Shang & Weinberg, 2013).
- 8. *Perinatal* A time encompassing the entirety of the prenatal period through the first year postpartum (Moyer & Kinser, 2021; Rallis et al., 2014).
- 9. *Postpartum* For this study, postpartum encapsulates the time immediately following the birth of a child and extends through the first year of the child's life.
- 10. Prenatal The period in which a woman is pregnant.
- 11. Stop the clock Policies in which faculty on a tenure track are allowed to extend their tenure review for an allocated period of time, usually an additional year (Manchester et al., 2010).
- 12. *Tenure* An esteemed and elite academic position that is earned through exemplary teaching, research, and service during a tenure-tracked position that culminates in a formal review process and awarding of the position affording an indefinite teaching appointment barring rare circumstances.
- 13. *Transition* a process of passage from one life phase to another that occurs overtime (Chick & Meleis, 1986; Schumacher & Meleis, 1994).
- 14. *Work-family conflict* Individual perceptions of the inner conflict and interferences between work and family (Nomaguchi & Fettro, 2019).

- 15. Work-life balance Creating an equilibrium to balance the unequal output given to an individual's career and life roles by compartmentalizing each responsibility.
- 16. *Work-life integration* Blending life roles and career responsibilities to foster the intersection of one's roles and identities.

Summary

In conclusion, women have made incredible strides in their presence in the workforce (LeanIn.Org & McKinsey & Company, 2022; Wulfhart, 2023), obtainment of higher education (National Center for Education Statistics, 2023; Vellen & Derks, 2021), and success in careers within academic institutions (Amsler & Motta, 2019). While the academy continues to embrace gendered differences among faculty (Rosa & Clavero, 2022; Van Veelen & Derks, 2022), women who are simultaneously mothers continue to face barriers and preconceived assumptions from both the academy and society (Acker, 1990; De Marneffe, 2019; Goodwin & Huppatz, 2010; McCutcheon & Morrison, 2016; Raddon, 2002; Williams et al., 2016). For the mother in academia, these barriers intermingle with the critical periods of Mercer's (2004) BAM theory, which coincides with the perinatal period of a woman's life. During the perinatal period, the transition to motherhood is experienced, and the process of reconciling a new role into an integrated identity of mother and scholar occurs. Therefore, this research study sought to lay the groundwork for a more comprehensive understanding of the perinatal experiences of women in academia and how these experiences affect their identities and outlook on their careers in the academy.

CHAPTER TWO: LITERATURE REVIEW

Overview

Chapter Two provides a conceptual framework informed by theory and research to examine the perinatal transitions women in academia experience in becoming a mother. To understand how these experiences are unique for women in academia, the related literature first provides an overview of the current information pertaining to women in the workforce, including the disparities mothers face in their professional careers. The phenomenon of women, specifically mothers in academia, is then examined, focusing on the influence motherhood has upon their career progression, work and family, and overall well-being, both personally and professionally in the academy. The related literature further examines the unique transition and identity shifts women face in becoming a mother within the academy, a characteristic gap in the literature wherein little attention has been given.

Theoretical Framework

Women and their careers in academia have been examined both qualitatively (Armenti, 2004; Isgro & Castañeda, 2015) and quantitatively (Bavishi et al., 2010; Johnson, 2017; Shreffler et al., 2019; Wolf-Wendel & Ward, 2006), noting the challenges associated with gendered success in the academy. In the past two decades, attention to the dynamics of academic mothers has been populating in the literature (Dickson, 2018; Mason & Goulden, 2002; Stockdell-Giesler & Ingalls, 2007; Ysseldyk et al., 2019); however, little attention has been given to understanding how the perinatal experiences of these women affect their perception of the transition through the maternal role processes of becoming a mother, also known as matrescence. Furthermore, the literature remains largely silent on how the transition to motherhood affects a woman's preexisting identity in the academy, and the dynamics of how these two roles and identities affect

one another. Mercer's (1995) becoming a mother theory (BAM) provides a framework for examining the identity-shaping perinatal experiences women transition through and how these experiences, coupled with a woman's role in the academy, affect her self-concept and identity.

Mercer's (1985, 1986, 1995, 2004) theory stems from Rubin's (1961) maternal role attainment (MRA) theory, which articulated the developmental stages and process of early motherhood, leading to the development of the woman's identity as a mother, a process also known as maternal role development (Rubin, 1967). While Rubin (1967) concluded that MRA occurred around eight to nine months postpartum, Mercer (2004) sought to explain how MRA is a journey through the transitions and challenges of the mother's lifespan (Moyer & Kinser, 2021). Raphael's (1973) term matrescence, which was revived and expanded through Athan's continued work (Athan & Reel, 2015), furthers these ideas by examining the maternal role from a woman-focused approach rather than a child-centric focus, leading to the concept of becoming a mother (BAM). In addition to building upon MRA, and matrescence, BAM takes into consideration the woman's position and interaction within her ecological system. That is why Bronfenbrenner's (1979) theory, broadened to include the bioecological components (Bronfenbrenner, 2005), is used in the examination of this study (Miller, 2011). This hermeneutic phenomenological study applied the BAM theory supported by Bronfenbrenner's bioecological model to guide the examination of the perinatal experiences of women becoming mothers within academia.

Becoming a Mother Theory

BAM theory broadens and refines the four linear cognitive stages of perinatal psychosocial development, which Rubin (1967) defined as leading to the completion of the woman's maternal identity. The path to MRA includes one's self-concept and leads to her

acknowledgment of maternal competency and acceptance of her identity, thus, the achievement of MRA (Copeland & Harbaugh, 2004; Mercer, 1985; Sleutel, 2003; Thornton & Nardi, 1975). Mercer (2004), however, recognized that these oscillating emotional transitions (stages) work in tandem to develop the mother's identity throughout her perinatal transition (Copeland & Harbaugh, 2019). The BAM framework recognizes the interconnectedness of the woman's maternal identity development to the varied levels of her ecological system, thus drawing upon Bronfenbrenner's (1979, 1999, 2005) work (Huang et al., 2022; Miller, 2011).

Bronfenbrenner's Bioecological Model

Bronfenbrenner's (1979) ecological systems theory was originally developed to examine the social systems that act upon human development, specifically, a child's development. In the decades following its development, Bronfenbrenner's theory has undergone revisions and refinement and is vastly applied across disciplines (Lehman et al., 2017; Panopoulos & Drossinou-Korea, 2020), noting the influential role an individual's environment has upon their biopsychosocial development and well-being. Bronfenbrenner's framework fosters the analysis of the interconnected complexities involved in an individual's development, family and relational systems, the intuitions that impact them, and cultural systems (Shelton, 2018; Teater, 2022). Bronfenbrenner's (1979) ecological systems theory sought to examine these interactions by dividing the multiple influences upon an individual into five nested reciprocal and complex levels of an individual's environment. Bronfenbrenner (1995, 2005) later made a significant revision to the framework of his ecological systems theory by placing the individual at the center of the hub and renaming the theory as the bioecological model (BM). Rather than examining individuals as simply byproducts of their environment and time, the BM model furthers the ecological perspective by denoting four crucial and influential components of an individual's

development known as the process-person-context-time (PPCT) model (Cassells & Evans, 2020).

Process, better known as proximal process, encompasses the interaction of the individual with people and objects and is the starting point for the discussion of the interplay between the remaining components. The person encompasses the unique aspects of the individual, including heredity traits, physiological appearances and capabilities, and psychological properties, including personality. Context encompasses the original and widely known nested ecological model (Cassells & Evans, 2020). Bronfenbrenner (1977, 1979) labeled these interacting spheres starting from the most intimate, the microsystem, to the macro context within the overarching chronosystem, which transitions into the final component of PPCT, time. Time, a vast component, encompasses processes, events, culture, and at the highest level, the period in which the individual lives. Bronfenbrenner's BM can be summarized through the concept that the action in human development lies within the interaction (Cassells & Evans, 2020).

To comprehensively understand the numerous interactions that affect women in higher education during the perinatal period and their unique identity formation of BAM, the whole of a woman's ecological system must be considered. The academic institution encompasses multiple layers in the context of a woman's life. While formally, the academy may lie within the exosystem, the day-to-day realities of a woman's academic career within the institution occur directly in her microsystem. In order to examine the interconnectedness of the relationship between the academic mother and the institution, the mesosystem is applied, where the interrelationships between two or more microsystem components occur (Dailey-Hebert & Dennis, 2014; Newman & Newman, 2020). The inseparable relationship between the person, the academic mother, and her career within the academic institution makes the institution a crucial

component of her transition into her academic and maternal identities. Here lies the idea of intersectionality, where the forging of identities act upon each other, crossing multiple domains (Abes et al., 2007). Role enhancement theory furthers the reality of these multiple roles, which have the potential to bring positive effects, but, inversely, when stretched and overloaded, can result in negative repercussions (Barnett & Hyde, 2001; Kinnunen et al., 2006). Therefore, the bioecological effects upon an individual's transitioning and merging identities cannot be segmented. The academy can either enable or constrain a woman's transition to BAM through its effects on the inner workings within her context, the layers of her ecological system (Meleis et al., 2000; Motherly, 2020).

Stages of BAM

To conceptualize the role acquisitions of BAM, Mercer (2004) defined the critical markers of the process into the following categories: (a) prenatal commitment, attachment, and preparation, (b) acquaintance, learning, and physical renewal, (c) working towards a new normal, and (d) attainment of one's maternal identity. Through the psychosocial work that a woman does during her pregnancy and the first-year postpartum, her maternal identity is constructed, which is incorporated into her self-system (Mercer, 2004; Sedikides et al., 2013). The following briefly describes each stage in Mercer's (2004) process of BAM.

The first stage of BAM occurs prenatally and encompasses commitment, attachment, and preparation, from which the mother adjusts to the anticipated realities of her new role. This is the beginning of the mother's restructuring of her sense of self and is a process requiring intensive emotional work throughout the perinatal period (Emmanuel et al., 2011). During this stage, the mother takes in society's expectations of motherhood, while grappling with pregnancy's physiological and psychological changes. In addition to dealing with the concerns of prenatal

health and childbirth preparations, she also begins to visualize motherhood. This is an important time of psychosocial preparation as greater adaptation prenatally is correlated to greater adaptation in the mother's role postpartum and satisfaction with motherhood (Mercer, 2004). While this first stage is confined to the woman's time of pregnancy, there is a large variation in the occurrence of the last three, which are greatly influenced by variables surrounding the mother/child dyad and the woman's ecological system (Liu et al., 2012).

Preceding the next stage in BAM, the event of childbirth itself must occur. The actual birth is often deeply personal and, in many cases, a life-altering stage of BAM. The process of childbirth is often quite different than anticipated and planned for and can leave women with a variety of experiences, from empowerment to helplessness (Gibbins & Thomson, 2001; Henriksen et al., 2017; MacLellan, 2015; Prata et al., 2017). Birth trauma, as perceived by the mother, occurs in 34% to 45% of births and can have long-term implications for both the mother and child (Alcorn et al., 2010; PATTCh, 2021; Slade, 2006), along with the implications of extended hospital stays for either the mother or infant (Emmanuel et al., 2012). The implications of the mother's birthing experiences are an essential consideration when examining the process of BAM.

Following childbirth, the mother enters the acquaintance, learning, and physical renewal stage. The mother begins adapting to her role by demonstrating learned behaviors from others and, in many aspects, conforming to family and societal norms. For the academic mother, this would include the norms posited by the framework of her academic institution (Phillips et al., 2022). This is also a time of infant caretaking, along with learning and adapting to the uniqueness of her child.

The subsequent stage is moving towards a new normal, in which the woman's maternal identity develops as her mothering capabilities take root as she beings bonding with her baby in the permanency of their relationship (Martell, 2001; Miller, 2007). This is a time marked by settling in, which takes shape in various dimensions. She begins settling into her post-pregnancy body, and though it may be an aspect of contention for her, she often recognizes the remarkable capabilities of her body as she cares for her infant. She settles into the changing dynamics of relationships, drawing upon those closest to her while also redefining and reorchestrating relationships as she engages with her new life and incorporates motherhood into her sense of self as she makes sense of her past and her future goals (Copeland & Harbaugh, 2019; Mercer, 2004; Nelson, 2003). The stronger a mother's maternal confidence, the stronger her belief in her abilities to manage the responsibilities of both motherhood and work (Ladge et al., 2018). In short, she settles into her new normal of motherhood.

The attainment of one's maternal identity is the final stage of BAM. It has been proposed that many women may achieve the restructuring and transformative process of maternal development around four months postpartum. However, as previously noted, Rubin (1967) saw MRA occurring around eight to nine months. Undoubtedly, the complexities of the variables that influence this time frame, such as pre-term birth, maternal hospitalization, and more, vary widely and must also be considered (Mercer, 2004). According to Mercer (2004), the mother feels capable in her role and is able to experience the joy of motherhood as she continues to bond with her child. In this stage, the mother has integrated formal mothering experiences with personal experiences and internalizes her transformed sense of self as a mother. She also incorporates her identity into her responsibilities for her child and their future well-being. It is clear that BAM is a

dynamic and multifaceted process, and for multiparous women, the mother must again cycle through the stages with each subsequent child.

It is through Mercer's (2004) theory, integrated with Bronfenbrenner's (2005) theory, that the role of women in academia will first be described, showing a small portion of the unique challenges that mark the path of women in academia, often prior to having children. This literature also sheds light on the monumental task of mothering while in the academy, describing why the perinatal period of BAM poses unique transitions for the mother in academia and how her academic identity and developing identity as a mother tandemly affect the other. Thus, the related literature review describes and aligns the BAM process with the current literature on women and mothers in academia.

Related Literature

The related literature in this portion of Chapter Two begins with a broad examination of the current participation of women and mothers in the workforce, narrowing in on women in academia. The current landscape of women in academia is addressed, along with perspectives toward motherhood within academia based on internal and external influences and experiences. The climate of academia for mothers is addressed, along with institutional policies and the expectations that influence the work and family balance of mothers. The pressures conveyed by the institution are addressed, as well as the effects such may have upon perinatal mothers in academia. In light of the academic framework of women in academia, specifically mothers, the perinatal transition of women from academic to mother and academic, along with shifts in one's identity, are examined. This chapter concludes through a summative perspective of how the reconciliation of a mother's two identities of mother and academic may benefit their success within the ivory tower, and the success of women to follow.

Mothers in the Workforce

In 2019, 57.4% of women in the United States participated in the labor force, representing a dramatic increase from the 1960s (U.S. Bureau of Labor Statistics, 2022). While in comparison, the participation of men in the workforce, which has continuously represented a higher percentage, has seen a 10% decrease between the 1970s and 2020 (Ullrich, 2021), with 69.2% of men employed in 2019 (U.S. Bureau of Labor Statistics, 2022). Between 1990 and 2020, the number of women in the workforce increased by more than 20 million (U.S. Bureau of Labor Statistics, 2023). Of these women in 2018, 32% were mothers and nearly two-thirds had children under the age of 18. This represents 23.5 million mothers, who were employed in full-time, year-round work in 2018 (Heggeness, 2018). In 2020, the participation of women in the workforce dropped to the lowest rate since 1987, at 56.2%, which points to an interesting gender-specific implication of the effects of the COVID-19 pandemic within the United States, which pose noteworthy inquiries into the diverse effects of the pandemic based on gender. These inquiries may add depth and light to understanding mothers' current participation in the workforce, specifically in academia.

In examining the participation of mothers in the workforce, it is noteworthy that many are mothers to small children. In 2020, 65.8% of mothers with at least one child under the age of six participated in the workforce, compared to 75.4% of mothers with at least one child between the ages of six to 17 (U.S. Bureau of Labor Statistics, 2021). This means that among mothers of small children, 2/3 are employed, and a total of 3/4 of mothers with at least one child under 17 participate in the workforce. However, in a post-COVID-19 climate, the number of working mothers in America declined, and among those who left the workforce, the largest attrition rate

of women was mothers to children under the age of six (Novello, 2022). However, even in the years of motherhood, women are uniquely persistent in their fields of work.

Between 2015 and 2019, the attrition rate of those leaving the workplace was higher for men than women (McKinsey & Company, 2021). However, in a post-COVID-19 era, women are now considering not only downshifting their careers, but at an unprecedented rate, mothers are considering leaving their field. In 2020, 17% of mothers with children under the age of 10 considered downshifting their careers while remaining in the workforce, while 23% of women considered leaving the workforce entirely. In contrast, only 10% of women without children considered leaving the workplace (McKinsey & Company, 2021). The exogenous effects of Covid-19 reverberate to the preexisting experiences of mothers in the workforce and academia, potentially magnifying gendered work discrepancies and echoing the phenomenon of the leaky pipeline and opting out (Alper & Gibson, 1993; Barsh & Yee, 2011; Berryman, 1983; Habicht, 2022; Shang & Weinberg, 2013; Young, 2015; Willey, 2020).

Leaky Pipeline

The leaky pipeline coveys the mental image of a large pool of qualified women scholars at the entry of the pipeline, which should flow smoothly to tenure (Wolfinger et al., 2009). However, women leak out as the pipe winds toward advanced career levels (Cardel et al., 2020). The leaking out of women leads to few achieving higher-level careers, such as tenure, despite equal qualifications to their male colleagues. This phenomenon is also referred to as the "pool problem" (Goulden et al., 2011) because of the low number of women in job applicant pools relative to their rates of doctoral degrees granted, which as of 2020, exceeded that of men by more than 20,000 (National Center for Education Statistics, 2023). Therefore, the leaky pipeline is a visual analogy often used in the literature to reflect the plight of women in academia

(Habicht, 2022). In considering the reasons for these leaks, various themes have been noted, such as chilly institutional and departmental climates to gender bias and discrimination, innate differences in cognition, a lack of mentoring, and the roles attributed to marriage and children (Gappa et al, 2007; Goulden et al., 2011; Maranto & Griffin, 2011; Morley, 2013; Savigny, 2014). In particular, women in academia face gender specific factors that may influence or necessitate their decision to shift their career goals away from obtaining professorship. The prominent reasons relate to children, family, and career dynamics (Habicht, 2022).

As the academic pipeline progresses, mothers have been found to experience what is termed the "parenthood gender gap" (Zheng et al., 2022, p.1) in that stereotyped biased hiring in academia has predicted a significant reduction in endorsement for employment of mothers in comparison to women in academia who are not parents (Stefanova & Latu, 2022). The bias against mothers in prominent careers is particularly noticeable through a research study using equivalent resumes with equivalent credentials between mothers and fathers. Mothers were nearly 80% less likely to be hired, half as likely to be promoted, and earned 7% less than women who were childless. In comparison, fathers in the same study earned \$13,000 more than mothers and 4% more than nonfathers (Correll et al., 2007). Furthermore, between 2020-2021, the salary for women in full-time instructional faculty positions is, on average, \$16,000 less than that of men (National Center for Education Statistics, 2022). Not only do women earn less, but they encounter a more significant pay gap when entering motherhood (Gangl & Ziefle, 2009). Furthermore, conceiving between one's 20s and early 30s restricts a woman's wages as an apparent wage increase accompanies a delayed entrance into motherhood (Miller, 2011). Following these findings, it may not be surprising that mothers with young children in the discipline of science are 35% less likely to even enter a tenure-track position after receiving their Ph.D. than fathers to young children. In the same way, mothers to young children who do enter a tenure-track position are 27% less likely than fathers in the like demographic to achieve tenure (Goulden et al., 2011).

Tenure

The origination of tenure sought to protect academic freedom and innovation (Cameron & College, 2010) by fostering the security of the academic's role (American Association of University Professors [AAUP], 1970), and in turn, the academic's work furthered the research production and teaching standards of the academic institution (Burke et al., 2019). In 2006, tenure was defined as a position providing a degree of economic confidence so as to be an appealing profession to both men and women of ability, which simultaneously afforded freedom in the work of teaching, research, and extramural activities (AAUP, 2006). However, the tenure process has historically been a long road filled with demands for high levels of academic production (Chambers, 2017). The tenure track, which in the United States is termed the "tenure clock," most commonly extends over six years (AAUP, 2022; Schaefer et al., 2015). While the demands of tenure vary with institution and discipline, in the United States, the foundational components that should mark an academic's tenure track are the demonstration of exemplary teaching, research, and service (Schaefer et al., 2015; Schuster & Finkelstein, 2006). Though all tenure-track faculty are called to execute a proverbial trinity of roles as they teach, serve, and conduct research (Kezar & Lester, 2009; Reybold & Alamia, 2008), there exists both an externally and internally imposed level of gender-specific duties and attributes that women must uphold in academia, largely that of emotional labor in the roles that require nurturing and caring, such as teaching and service (Angervall & Beach, 2018; Ashencaen Crabtree & Shiel, 2019; Dunbar et al., 2023; Guarino & Borden, 2017; Macfarlane & Burg, 2019; McCaughey, 2019;

Merlo, 2016; Westring et al., 2016). However, these roles decrease women's time to produce research, and the significant contribution women make to university-related internal service roles in comparison to male faculty (Angervall & Beach, 2018; Guarino & Borden, 2017; O'Meara et al., 2019) are undervalued in the academy and the tenure review process (Drennan, 2001; Merlo, 2016; Ward, 2003).

Tenure, once considered a rite of passage for exemplary postdoctoral candidates, has become an elusive position following the AAUP's concern over the influx of tenure-tracked professors in the 1960s (AAUP, 2022) and the wake of the neoliberalism restructuring of academia (Alleman & Haviland, 2017). Tenure positions continue to decline, affording tenure to only 10.5% of faculty positions within the United States (AAUP, 2022). Consequently, contingent positions, such as part-time and full-time non-tenure track positions, have increased by 211% between 2004 and 2019 (AAUP, 2022). The paradox is that AAUP (2018) stipulates that the total instruction for an institution should be comprised of no more than 15% non-tenure-track faculty appointments, and yet, in 2016, among all U.S. institutions, the number of contingent instructional positions aside from tenure-track reached 73% of which women represented a slight majority (Yakoboski, 2018). However, half of those holding a contingent position would prefer to have a tenure-track position (Danaei, 2019).

The drastic increase in contingent faculty positions undermines the foundational principles of tenure in which academic freedom and fostering of free inquiry are protected, and instead, leaves faculty unprotected to critique and administrative changes that jeopardize their position. In conjunction, contingent faculty receive drastically lower pay than full-time professors, are frequently employed at multiple academic institutions, and are excluded from participating in departmental input and receiving professional mentorship (AAUP, 2018;

Alleman & Haviland, 2017; Anthony et al., 2020), which historically have been fundamental tenets of the faculty role and identity (Kezar & Lester, 2009; Levin & Shaker, 2011).

Furthermore, the very process of tenure is ridden with ambiguity, stress, anxiety, and pressure, as performance is measured by publications, production of research, institutional involvement, and even student perceptions (Merlo, 2016; Murphy et al., 2021; Schoening, 2009; Solomon, 2011; Ward & Wolf-Wendel, 2004; Wolf-Wendel & Ward, 2006). Coupled with the scarcity of tenure track positions and exceedingly high expectations and demands, the track to tenure can encompass, in some cases, nearly a decade of a grueling professional life (Jago, 2002; Yoon, 2016). In as much, in 1993, the AAUP (2022) self-criticized their standards for ramping up the expectations for tenure and deemed them cruel to faculty and their individuality; instead, reasonable expectations for measuring tenure qualifications should be defined and articulated in line with the institution's mission. Nevertheless, the pressure to produce professional publications, research, and exemplary teaching and service, which must occur and accrue throughout the tenure track, remains (Murphy et al., 2021; Solomon, 2011; Ward & Wolf-Wendel, 2004).

The encompassing demands of the tenure track have led to tenure burnout (Schubert-Irastorza & Fabry, 2014), as seen through what some academic mothers have coined, the hospital fantasy, in which the academic has idealizations of severe physical ailments leading to hospitalization simply to find time to rest and recoup (Connelly & Ghodsee, 2011). Furthermore, given that the availability of tenure track positions continues to decline and, inversely, continues to become increasingly competitive (Moors et al., 2022), such positions rarely offer reduced workloads, an aspect that a large majority of women report needing (Declercq et al., 2013). Reduced workloads may include assuming a part-time position, which women during their

reproductive stages may need to manage caregiving responsibilities (Moors et al., 2022). In turn, caregiving responsibilities may also drastically hinder the ability of women to engage in after work hours seminars (Savigny, 2014) and from presenting at conferences, which are important aspects of building a tenure vitae and inter-disciplinary networking (Bos et al., 2019; Hewerd et al., 1997; Mata et al., 2010; Tower & Latimer, 2016). Conferences also provide venues for publication as academics receive feedback leading to the revision of scholarly work and opportunities to gain visibility leading toward publication (Bos et al., 2019), another critical component toward achieving tenure where discrepancies between disciplines and gender in publications continue to exist (Bendels et al., 2018; Jemielniak et al., 2022).

Ultimately, most women scholars land in non-ladder-rank academic positions, primarily teaching positions such as lecturer and adjunct or, in some cases, due to necessity, opt into such as a result of the conflicting needs of both family and institution (Hillier, 2021; National Center for Education Statistics, 2022; Wolf-Wendel & Ward, 2006). However, the ladder-rank role of professorship has been shown to be an empowering, intellectual force of independence for women in academia. Yet achieving these positions is far from the norm and even less common at prestigious institutions (Macfarlane & Burg, 2019). As found at one prestigious public university, 91% of campus faculty who were women were employed in non-ladder-rank academic positions (Mason & Goulden, 2002). Of the women who do make it to the ladder rank, they were predominately without children more than a decade past their Ph.D. (Mason & Goulden, 2002). Though gender and racial bias regarding faculty and staff ranking are an implicit concern (Silber et al., 2022), the gender-biased work-life balance is of particular concern for mothers, leading to what has been deemed the "mommy track." The term "mommy track" originated among female lawyers who experienced career retribution following a delegation of

family priorities, for a time, over that of work (Cummins, 2012; Korzec, 1997). Thus, the "mommy track" has led to women being cornered into fields or positions deemed appropriate to work and family obligations regardless of their preferences (Faludi, 1991; Hewerd et al., 1997; Kiester, 2022; Williams & Segel, 2003; J. L. Young & Hines, 2020).

Derailment of Childbirth

Academia is a known profession wherein the boundaries of work and home life blur (Wright et al., 2003; Bagilhole & White, 2013), with work life expanding to all of life (Amsler & Motta, 2019). Academics have described their work as the pressure cooker of life, a career to which they must be wholly committed 24/7 (McDermott, 2020; Wright et al., 2003; Ysseldyk et al., 2019). Given this, women who had children after becoming postdoctoral scholars were twice (44%) as likely to change their career goal than women with no children and with no future plans to have children (20%) (Goulden et al., 2011). In conjunction with the workforce literature on mothers to young children, for mothers transitioning to a tenure track, having a child younger than six years of age was found to be harmful to her career (Ginther & Khan, 2009; Schoening, 2009; Wolfinger et al., 2008) and detrimental to her achievement of tenure (Ysseldyk et al., 2019). More so, the role of women in academics has been described as foundationally incompatible with the responsibilities and roles of mothering (Mason et al., 2009; Wolf-Wendel & Ward, 2006).

The incompatibility of motherhood and academia is further reiterated through a survey of over 4,000 female doctoral students, of whom 84% were somewhat or very concerned about the compatibility and family friendliness of their aspiring career plans (Mason et al., 2009). As such, the downshifting of career aspirations can be seen occurring even prior to reaching the culmination of Ph.D. studies, as just under 1/3 of women who were pursuing goals of

professorship with research emphasis chose no longer to pursue this career path (Mason et al., 2020).

Women's concerns about motherhood are further solidified as fewer female Ph.D. students have access to mentoring then their male colleagues (Dever et al., 2008; Paulus et al., 2016), and even fewer witness or have access to role models or mentors in academia who are balancing gender-specific responsibilities (Colbeck & Drago, 2010; Straus et al., 2009). The need for role models who have transitioned from their roles as academic to that of academic and mother is crucial, not only during a woman's Ph.D., but throughout and beyond the tenure track process (Fulweiler et al., 2021; Trower & Gallagher, 2010; Wolf-Wendel & Ward, 2006). The lack of mother mentors leaves a gap in guiding upcoming women in the nuances of academia and maternal adjustment (Straus et al., 2009). This is furthering a disconnect in a mother's development of her maternal identity as she is not provided with examples of formal mothering in academia, an important component in the process of BAM (Mercer, 2004). The lack of mentoring examples has led to the concern by 51% of female doctoral students that they will not sufficiently progress toward their career goals if they have children (Mason et al., 2009). A reiteration of this concern can be seen in the decrease of women faculty who become mothers in the preceding five years following their doctoral completion, as they are less likely to reach tenure then their female colleagues without a child (Drago & Colbeck, 2003). The concerns of tenure are further validated, given that the timeline for progressing toward advanced scholarship roles is founded upon a historically male-centered career path (Quin et al., 2004; Schoening, 2009; Wolf-Wendel & Ward, 2006), a career path that coincides with a biologically critical time of a woman's life, her prime reproductive years for beginning a family (Ginther & Khan, 2009; Jacobs, 2004; Jacobs & Winslow, 2004; Trower & Gallagher, 2010; Varner, 2000).

Delaying Motherhood

Because of the need to earn tenure within a set time, academic careers often comingle with the family-forming years that align with women's prime reproductive years (Varner, 2000). These years tend to fall within an exceptionally demanding and stressful time of a tenure track career (Jacobs, 2004; Jacobs & Winslow, 2004a, 2004b; Marlo, 2016; Ward & Wolf-Wendel, 2004). The complexity for women's intersecting biological and tenure timeline has been noted since 1975 (Hochschild, 2011) and yet, continues to be a barrier (Moors et al., 2022). Women recognize this pull, and while more than 2/3 of faculty ladder women desire to have children, more than half intentionally delay having children due to the demands of their career (Rudd et al., 2008) or the felt bias of the academy towards caregiving (Clark, 2020; Ollilainen & Solomon, 2014; Ramnund-Mansingh & Khan, 2020). Women who have firm goals of progressing in their career may find themselves choosing not to have children or intentionally timing the birth of children around their career demands (Ysseldyk et al., 2019). In some cases, women may attempt to make invisible their pregnancy and beckoning motherhood to avoid penalization and to remain on track with the demands of work and scholarship (Armenti, 2004; Colbeck & Drago, 2010; Gappa et al., 2007; Mason et al., 2013; Ollilainen & Solomon, 2014; Rose, 2020; Rudd et al., 2008; Ward & Wolf-Wendel, 2012). These decisions have led to what has been called the postponement transition (Kohler et al., 2002; Mills et al., 2011; Nitsche & Brückner, 2021).

In order to meet the demands of educational and career investments, women possessing a post-graduate education are delaying their entrance to motherhood by nearly seven years. The median age of higher educated first-time mothers is now over 30 (Nitsche & Brückner, 2021). In academia, the average childbearing age of postdoctoral scholars lies between 30 to 34 years of

age (McConnell et al., 2018; Schoening, 2009), a time in which one's career is beginning alongside the entrance into early middle age (Medley, 1980). Among Canadian postdoctoral scholars, 64.7% of men and women scholars had no children, despite 68.9% of those surveyed being married or in a common-law relationship (Mitchell et al., 2013). Despite pursuing advanced education and academic positions, many women still desire motherhood. Between 1994 and 2014, there has been a 20% increase in the rate of women with a postdoctoral degree giving birth (Livingston, 2018).

While on the forefront, this new scenario of the postponement of motherhood (Hakim, 2000) may seem like a way to achieve it all in a post-modern society, in actuality, this postponement gives way to the increased potential for reproductive complications, both physiological and psychological (Budds et al, 2016; Falletta et al., 2020; Friese et al., 2008; Leridon, 2004; Sauer, 2015). Despite the efforts to delay the entrance into motherhood, the modified age for entering motherhood coincides with the age at which a decline in women faculty begins in higher education (McChesney & Bichsel, 2020).

Opting Out

The decline in women faculty leads to the phenomenon of "opting out" (Ginther & Khan, 2009; Preston, 2004), where women either deliberately or by necessity make the decision to prioritize the domestic needs and care of their family in lieu of their professional success, either by leaving their profession entirely or by reducing their career aspirations (Bueskens, 2018; Shang & Weinberg, 2013; Ward & Wolf-Wendel, 2012). A small qualitative study of women, including those in academia, found that 12-18 months following childbirth, only 20% of participants were employed full-time (Gregory, 2021). While on the forefront, leaving employment may appear to be a choice, there are, in fact multiple complexities that hinder the

degree of a woman's individual agency in her decision making to re-enter her profession (Gregory, 2021; Salmela-Aro, 2009). The attrition rate of women in a STEM field who leave their discipline within seven years of welcoming their first child is as high as 43% (Cech & Blair-Loy, 2019). While policies have been made to prevent the exodus of women from the workforce based on reproductive and family choice topics, the nuances of these policies are practiced less-than-perfectly. The two universal policies within the United States are the Pregnancy Discrimination Act of 1978 and the Family Medical Leave Act (FMLA), which are in place to protect women from prejudices and discrimination based on their reproductive and family choices (Solinger, 2007).

The FMLA provides an eligible parent with up to twelve weeks of leave within a 12-month calendar year, with guaranteed continued employment following their leave. However, in the case of mothers, these twelve weeks must include any absences she may need prenatally or postpartum due to serious health conditions, both physiological and psychological (U.S. Department of Labor, 2012; 2022). The occurrence of these complications has occurred at alarming rates over the past decade, of which the highest rates of prenatal and postpartum complications are for mothers between the ages of 34 - 44 (Blue Cross Blue Shield, The Health of America, 2020; Falletta et al., 2020), which as previously noted, is when many postdoctoral scholars are beginning their career. Another stipulation to the FMLA policy is that the leave taken under this policy is not required to be paid (Guthrie & Roth, 1999; U.S. Department of Labor, 2012). In comparative countries, between six months to a year and a half of leave is provided, with numerous countries providing 80%-100% of the employee's salary for more than 12 weeks (Livingston & Thomas, 2019; Wheelwright, 2022). Despite the limited time of leave afforded to new mothers, it is worth noting that academic institutions have sought to recognize

the unique professional and personal demands placed upon caregivers during the first year of a child's life. As such, a vast proportion have instituted what is commonly referred to as "stop the clock policies" (STC) (McEacharn et al., 2021).

Stop the Clock

STC policies are intended to allow tenure-track faculty up to an additional year to achieve tenure after welcoming a child, thus, stopping the clock (Manchester et al., 2010). These policies have sought equality and, in many institutions, extend not only to the mother, but also to the paternal caregiver. However, many only offer these policies for welcoming up to two children and none thereafter (Office of the Provost University of Michigan, 2012). In theory, such policies should facilitate the distribution of caregiver responsibilities among spouses and facilitate time for family bonding. However, STC policies are lacking in universality and may differ among institutions. While the goal of extending these policies to the paternal caregiver is commendable and elevates the family friendliness of the institution, in practicality, these policies may award unequal benefits to faculty who are fathers who can utilize the time to further their production of research (Antecol et al., 2018).

In contrast, the mother's time is often preoccupied with caregiving responsibilities and physiological and psychological healing (Ysseldyk et al., 2019). Despite the existence of these policies, stopping the clock or even taking maternity leave can negatively affect the mother's career, the perception of her commitment to academia, and future earnings (AAUP, 2022; Gangl & Ziefle, 2009; Manchester et al., 2013; Mason & Goulden, 2002; J. L. Young & Hines, 2020; Williams & Segal, 2003). Mothers have also cited a watered-down connotation by their institution toward the medical need that women have following childbirth, using the label of "sabbatical" rather than an accurate description of the need for the leave (Derrick et al., 2022)

and have been cornered into feeling negatively for the strain their leave places on the department (Gregory, 2021; Savigny, 2014). In as much, when women opt for a shorter leave or even forgo maternity leave, studies have shown a decrease in maternal sensitivity and poorer interactions between the mother and infant (Plotka & Busch-Rossnagel, 2018) and even an increased propensity to depression for the mother later in life (Avendano et al., 2015; Kornfeind & Sipsma, 2018). It is worth noting, in some countries, researchers report longer maternity leaves to be correlated with a decreased commitment by the mother to resuming her previous work (Gangl & Ziefle, 2015), and a high level of discrepancy in work-life balance centered around maternity leave is more noticeable in the United States than European countries (Ysseldyk et al., 2019). Furthermore, women with high maternal confidence, which is an integral part of the third and fourth phases of BAM, have a better relationship with their work and family responsibilities, which is also correlated to their intent to remain in their place of employment (Ladge et al., 2018). Despite the potentially adverse outcomes of utilizing these family leave policies, the demands following the birth of a child and into early motherhood necessitate, to some degree, the reduction of career aspirations, especially those associated with benchmarks in academia, such as scholarship and service (Antecol et al., 2018; Manchester et al., 2013; Treviño et al., 2018).

Undeniably, the working mother's career overflows into the second shift of domestic and childcare responsibilities, which comingles with her professional career rather than neatly fitting into separate quadrants (Fothergill & Feltey, 2003; Goode, 2000; Korzec, 1997; Torr & Short, 2004). In 1990, mothers in academia were found to invest around 80 hours of collective work each week into their home and professional responsibilities (Gregory, 1995; Hensel, 1990). Ten years later, in the early 2000s, the time between professional and domestic responsibilities

jumped to over 100 hours weekly (Mason & Goulden, 2002). Despite political agendas to address the division of gendered work/care (Gregory, 2021), the amount of time women spend in unpaid care work is disproportionately more than men, despite the limited resource of time which must be divided between professional and personal activities (Ferrant et al., 2014; Grice et al., 2011; McCutcheon & Morrison, 2016). The division of gendered work/care is often a notable link in institutional stereotypes of gender roles, which may also lead to discrimination (Ferrant et al., 2014). The role of primary caregiver in 2018 was nearly eight times higher among women in academia at 30.6% than for men at 3.9% (Derrick et al., 2022). The responsibilities tied to caring with equal weight for career and family needs have been found to be a source of significant stress for women (Lamar & Forbes, 2020; Mason & Goulden, 2002). Twice as many women as men consider parenting and childcare to be critical determiners in their decision to remain in research (Cardel et al., 2020).

When inquiring into the trade-offs made by mothers regarding their family, specifically, children to their career, more than one-fourth had made career sacrifices based upon these motherhood responsibilities. However, their work responsibilities still led to their family relationships suffering (Rudd et al., 2008). This may be partly due to the unequal support experienced among mothers and fathers in academia.

In 2008, men in academia were four times more likely than women in academia to have partners who did not participate in work outside of the home (Schiebinger et al., 2008).

According to Becker's (1965) family economic approach, each partner in a relationship specializes in either work or family. Since family responsibilities are historically attributed to women, their careers are more often characterized by career breaks or part-time jobs, usually caused by having children (Cech & Blair-Loy, 2019; Kleven et al., 2019; Ledin et al., 2007). The

actuality of Becker's family economic approach can be seen illustrated amidst the COVID-19 pandemic, where disadvantages in work-life balance were experienced more often by mothers than fathers (Deryugina et al., 2021; King & Frederickson, 2021; Malisch et al., 2020). The conflict between work and family responsibilities leads to nearly 2/3 of women faculty describing the stress of work-related obligations as high (Kotini-Shah et al., 2022). Women also tend to be more critical of themselves and may hold themselves to a higher standard to balance their work and home life identities than expected by their colleagues and department leadership (Trower & Gallagher, 2010). Such personal scrutiny is common when facing uncertain changes related to one's identity (Fischer & Tangney, 1995). However, many mothers may feel cornered into proving their commitment to their work so far in that 44% of faculty mothers reported missing some of their child's important occasions (Colbeck & Drago, 2010). The psychological toll of contending with the deliberation between work and family decisions and commitments manifests in cognitive work-to-home spillover (Lott, 2020). These hidden assumptions can be mediated when clear communication and institutional support are in place (Trower & Gallagher, 2010). Without support though from both the institution and a woman's immediate relationships, the stress and pressures experienced from the push and pull of work and family may only be exasperated and lead to guilt and negative self-assessments (Grice et al., 2011; Pan & Yeh, 2012; Raddon, 2002; Savigny, 2014).

Work-Family Conflict

A common theme among working mothers is their struggle with the inner conflict between their career and their role as a mother (Ladge et al., 2018; Oates et al., 2005; Polasky & Holahan, 1998). This tug of managing one's life between their occupation and personal life is often conveyed in the discussion of work-family conflict (WFC) (Barbu et al., 2022; Rapoport &

Rapoport, 1971). The concern of WFC began to appear in the research labeled as work-family following the rise in women's employment in the 1960s, as the literature began to examine the working mother and the biopsychosocial components of stress and burnout (Lewis & Cooper, 1999). With the 21st century rise in technology and the increasingly competitive atmosphere of the neoliberalism of academia, the context of an individual's work has intensified, creating a 24/7 workplace of productivity, resulting in what some have labeled the time famine (Gambles et al., 2006; Gibbs et al., 2014; Lewis et al., 2007; Perlow, 1999; Rosa, 2022; Wolf-Wendel & Ward, 2006). While there is no distinctive line denoting when work and family are conflicted, the subjectivity of WFC falls to the individual perceptions a mother has of her work and family interferences and whether these roles are mutually incompatible at times (Grice et al., 2011; Nomaguchi & Fettro, 2019). Among the variables that influence WFC, the age of a mother's children may significantly affect her work and family relationship. In conjunction with the previous literature on mothers to children who are under the age of six, 68% of women in 1987 reported feeling that their work and family responsibilities conflicted. However, in 2020, despite progressive feminist agendas, the percentage of full-time mothers whose WFC caused stress and burnout was 54%, only a 14% decrease in 33 years (Motherly, 2020). The impact of WFC is typically at its highest point for parents with younger children (Cooklin et al., 2016).

Cross-sectional and longitudinal studies show that the problem of WFC has negative ramifications for the mother's career progression and her physiological and psychological well-being (Allen & Armstrong, 2006; Dizaho et al., 2016). Grice et al. (2011) found that for postpartum women with high levels of job spillover into their home life, their mental health scores were significantly worse than women who reported low levels of spillover. While flexible work hours which foster spillover have been upheld as an advantage of academia, for postpartum

women, such may have adverse mental health outcomes (Grice et al., 2011). Though autonomy may be promoted through the pseudo-flexible work model of academia (McCutcheon & Morrison, 2016), telecommuting arrangements have been shown to magnify work-family conflict (Golden et al., 2006). Though the flexible work model, to an extent, provides an opportunity for women to remain within their fields and lessens the wage penalty (Fuller & Hirsh, 2019), it also encourages longer hours and intensity of work, and has been coined as the autonomy (control) paradox (Putnam et al., 2014).

The intensified work environment of a woman's mesosystem acting upon her microsystem of family and identity may forcefully influence the frequently posed question of whether a mother can work while also mothering well. This is a question that corresponds to nearly every transitional stage of BAM (Ladge et al., 2018; Mercer, 2004; Raddon, 2002). It is the dynamics of WFC that are experienced as a mother's academic role conflicts with her role to her family, and the opposite of when her role to her family conflicts with her work, also known as family-to-work conflict that leads to inter-role conflict (Kahn et al., 1964; Love et al., 2010). As previously discussed, inter-role conflict is at the core of the assumption that academia and motherhood are incompatible (Eby et al., 2010), an assumption that affects women at every level of their bioecological system.

Work-life Balance and Integration

In an attempt to mitigate inter-role conflict and find a middle-ground between the delicate scales of caregiving and home life to those of one's work life, the work-life balance (WLB) model is often proposed. Though the concept of creating work and home life boundaries, as premised through WLB, may appear to be a solution, as outlined above, such models are often impractical in academia (Althammer et al., 2021; Bartlett et al., 2021; Rosa, 2021). Furthermore,

WLB may perpetuate divisiveness in the academic mother's identity, a salient identity that, through integration, has the potential for positive satisfaction spillover (Barnett & Hyde, 2001; Provost Savard & Dagenais-Desmarais, 2023; Wolf-Wendel & Ward, 2006). Yet, even the term WLB invokes imagery portraying the two domains in a dichotomy that is essentially in opposition to the other (BerkeleyHass, n.d.; Kossek & Lambert, 2005), an image that continues to perpetuate a conflicting view of the demands of both roles and is subtly but often implicitly gendered (Asfahani, 2021; Kossek & Lambert, 2005). As such, inter-role conflict continues to be cited as one of the contributing challenges mothers in academia face (Zheng et al., 2022). Rather than examining the domains of one's life through segmented scales of balance, work-life integration (WLI) approaches the roles and identities of an individual as synergies (BerkeleyHass, n.d.), recognizing the individual's bioecological system and looking at the various levels of interaction.

The concept of WLI seeks to fundamentally reject the segmentation theory wherein work and life do not mix or influence the other (Blood & Wolfe, 1960; Hart, 1999; Young & Kleiner, 1992). WLI accepts and fosters that one's roles will spill over into the other (Kossek & Lambert, 2005). The concept of spillover recognizes that behaviors, emotions, and attitudes stemming from each role's unique capacities will carry over into the other (Lambert, 1990). For WLI to occur successfully, it is foundational that institutional climate and culture (Barbu et al., 2022) accept a holistic picture of an individual's ecological system. Such a perspective may facilitate recognizing unique work and life stages, such as pre- and post-tenure adjacent to early motherhood (McCutcheon & Morrison, 2016). The concepts of WLI also stand to potentially rebut the prominent conceptualization of the ideal worker (Kossek & Lambert, 2005). However,

as previously noted, in the present climate of academia, the literature points to the significant stress women experience in their intersecting roles as women, mothers, and academics.

Psychological Toll

When the perceived demands of a mother's professional identity remain high, her psychological stress only increases (Lamar & Forbes, 2020). Compounding the intersectionality of WFC and stress were the effects of the COVID-19 pandemic in which women faculty with young children, who were most likely to be assistant and associate professors, reported higher levels of work and home stress and disturbances in work balance and self-care (Kotini-Shah et al., 2022). Since 2020, the gap in burnout between men and women has doubled (LeanIn.Org & McKinsey & Company, 2022). Burnout is likely when educators experience a disconnect or conflict in their work in at least one or more of the following areas: work-life balance, autonomy or control, reward, community through their interactions in the workplace, employment fairness, or unjointed values between the institution and the educator (Leiter & Maslach, 2003). The dissonance between the demands of academia and one's personal life influences their quality of life and work (Bartlett et al., 2021; Fox et al., 2011; Kinman, 2014). Furthermore, women in academia tend to report higher levels of perceived stress (Teles et al., 2020) and emotional exhaustion (Schubert-Irastorza & Fabry, 2014; Wei & Ye, 2022) than their male colleagues.

Emotional exhaustion, which is also a marker of burnout (Lindström et al., 2011; Teles et al., 2020), including both career and parental burnout, is exasperated by stress (Lebert-Charron et al., 2021). The cycle of stress, emotional exhaustion, and burnout should be considered carefully concerning the intersection of parental and academic identities, as stress at work increases the potential for parental burnout (Lindström et al., 2011). In light of the previous literature noting the lower rates of women promoted in academia, according to Beauregard et al. (2018),

caregiving responsibilities and the feelings accompanying a stagnant career may place mothers at heightened susceptibility to burnout. Mothers with a poor work-life relationship have reported mental health issues ranging from stress, to anxiety and depression (Ysseldyk et al., 2019). The ramifications of WFC, career stress, parental stress, and emotional exhaustion are particularly noteworthy when looking at the perinatal period for mothers, which Cooklin et al. (2016) found to be a physically exhausting season, full of significant transitions and changes, increasing the likelihood of WFC (Grice et al., 2011).

When mothers experience stress during the prenatal period, studies indicate a direct correlation to negative birth outcomes and long-term impacts on the child's behavioral and mental health (Coussons-Read, 2012). Furthermore, the experience of stress prenatally can hinder essential psychosocial functions between the mother and infant that are critical aspects of the first three stages of BAM (Kim, 2021). Women who experience work-related stress are also at an increased risk for depression and anxiety (Grzywacz & Bass, 2003; Melchior et al., 2007; Ysseldyk et al., 2019). The rate of depression prior to COVID-19 among those employed in academia was found to range from 25.7% to up to 53% (McClenahan et al., 2007; Winefield & Jarrett, 2001). Scarpis et al. (2022) found depression significantly higher among junior academics, of whom 53% were female, with a mean age of 33. These findings correspond with the previous literature on career progression and the timing of when women are more apt to enter motherhood. Coincidentally, women are twice as likely as men to suffer from depression (Kuehner, 2017).

Depression

According to research conducted prior to the COVID-19 pandemic, Falletta et al. (2020) found that for mothers working in a university setting following childbirth, 54.9% reported

experiencing symptoms of depression, and 71.1% reported anxious feelings several days or more a week during the first month of returning to work. Furthermore, taking a full 12 weeks of parental leave is significant in reducing the likelihood of postpartum depressive symptoms (Chatterji & Markowitz, 2012; Komfeind, & Sipsma, 2018; Van Niel et al., 2020) as well as burnout (Whitney et al., 2023). Parental leave continues to have long-term mental health benefits as lifelong depression symptoms are reduced among women who take parental leave (Willey, 2020).

Returning to work after childbirth has been associated with depression for mothers who experience postpartum depression (PPD), of which the onset of depressive symptoms begins prior to delivery in 33% of mothers (Wisner et al., 2013). In the wake of COVID-19, up to 1/3 of mothers experienced PPD following birth (Chen, 2022). Prenatally, women who suffer from moderate to severe depression are also at an increased risk of having lower maternal self-confidence and a more difficult time adapting to the psychological restructuring of motherhood (Arante et al., 2020; Epifanio et al., 2015).

In conjunction with Mercer's (2004) theory of BAM, when a mother is not confident in her mothering, she is at an increased risk of maternal stress (Liu et al., 2012), and her self-concept and overall health suffers (Huang et al., 2022). The early months of motherhood are permeated with uncertainty and even a lack of control over one's circumstances, which may preemptively push a mother to seek an atmosphere of stability and control, such as is found in her academic work and identity (Raddon, 2002). Yet, maternal confidence occurs over time, and is an essential component of the third transitional stage toward becoming a mother and, thus, an indicator of the mother's psychosocial process in BAM (Arante et al., 2020; Mercer, 2004; Huang et al., 2022).

For mothers in academia, the pull to fulfill the standards of a successful academic, which spills into the psychological and spatial bounds of one's home, has been labeled depressing in and of itself (Raddon, 2002). Based on the literature, the innate stress of academia upon mothers, coupled with the stress of WFC, and the stress of perinatal transitions, may place mothers in academia at an increased risk of experiencing hindrances to their progression and experiences of BAM. These hindrances could affect the mother's integration and reconstruction of her academic identity with her forming identity as a mother.

Maternal Transition

For women, motherhood is one of the most universally experienced transitions (Korzec, 1997; Javadifar et al., 2016). Nevertheless, it is a period in life marking significant disruption and noteworthy adjustment problems (Nelson, 2003). Motherhood has been classified not only as a transition and a life stage, but ultimately, and more appropriately, as a developmental period (Benedek, 1959; Deave et al., 2008; Rogan et al., 1997), situating it within the umbrella of Erikson's (1968) psychosocial development. From Erikson's psychoanalytic theory, developmental theorists gain a framework for the central stages of human development.

The centrality of defining one's fidelity to their identity, occurring primarily during the adolescent stage, is critical to the overall well-being of the individual throughout the remaining life stages. Through life experiences, interactions, and crises, an individual's identity continues to be reworked throughout their lifespan. Nevertheless, even Erikson (1968) recognized that men and women construct their identities differently. Josselson (1987) found that women have a distinctively interpersonal nature in which their self-determination is continuously balanced in light of their relationships, as their relationships are closely tied to their self-esteem and even influence their moral decision-making (Gilligan, 1982). Identity, a profoundly personal and

abstruse concept, is one of constant construction, undergoing change based on experiences (Burke et al., 2019; Day et al., 2006; Henkel, 2005).

Given the dynamic and relational developmental task of motherhood, the woman transitions through unique and distinctive stages that transform her emotionally, physically, and psychologically, all of which ultimately will transform her identity (Javadifar et al., 2016; Mercer, 2004; Nelson, 2003; Raphael, 1973). While maternal confidence may be present around four months postpartum, it is doubtful that the developmental task and identity transition to motherhood could occur so finitely and achieve maternal attainment within the eight to nine months postpartum, as assumed by Rubin (1961, 1967). In some instances, the beginning of this process may occur before pregnancy (Athan & Reel, 2015); therefore Benedek's (1959) proposal of motherhood as an adult development phase seems most fitting. Raphael (1973), a medical anthropologist, was the first to describe this development phase through her term "matrescence."

Matrescence

Raphael (1973) began to bring to light the process a woman goes through in becoming a mother. O'Reilly (2009) furthered Raphel's notions in noting the mother must reconcile her two identities, or as it may be seen, her two self-concepts. The first is her unique identity tied to her self-concept, and the second is her identity as a mother, in which she cares for and nurtures another's developing identity. Incidentally, the second identity shift is one in which the woman's identity is also acted upon as she changes through the life of her child, who, in turn, births the production of the mother (Holloway, 2001; McMahon, 1995). In essence, this is a transformation of the mother's individuality wherein a new relationship, which produces a new role, becomes an inseparable part of one's sense of self (De Marneffe, 2019).

Through Hay's (2014) qualitative research, yet another identity shift was found to occur as working women stepped into motherhood. The overarching construct of a women's identity in her work shifted, and motherhood was elevated to the principal definer of her identity. Still a part of her identity, work was seen as a byproduct that accompanied who she was, a mother who works. This shift is worth noting as academia has been found to be a definer of one's identity (Solomon, 2011).

Academic Identity and Matrescence

Academic identity is an evolving concept that changes and adapts over time, while being refined throughout one's professional career (Gaus & Hall, 2015). Baldwin (1990) found that professional academic identity is established through a process of development, change, refocus, and reorientation of the roles the individual assumes. A woman's development of her academic identity guides and shapes her experiences and has a salient effect in grounding her amidst the challenges of academia (Ysseldyk et al., 2019). Furthermore, academic identity may be considered a group identity, which can reduce the stressors an individual experiences (Oyserman et al., 2006), providing a mental health protective factor when an academic self-identifies with their discipline (a historian, a chemist, et cetera) (Ysseldyk et al., 2019).

However, a woman's academic identity may be threatened when she transitions into motherhood. A dynamic shift in her identity must occur as she biologically and psychologically assumes a maternal identity (Laney et al., 2014; Mercer, 2004). Upon further examination, Mercer's (2004) theory on BAM closely mirrors Baldwin's (1990) identity process. As a woman develops through the perinatal stages (the process of development and change), and walks through the life changes brought about by her infant (change), she then must find ways to refocus and reorient her relationships, roles, and identity (refocus and reorient). In this necessary shifting

of identities, women may wrestle with the seeming incompatibility of their two roles of mother and academic (Iyer & Ryan, 2009), which has been noted in the literature (Mason et al., 2009; Wolf-Wendel & Ward, 2006; Ysseldyk et al., 2019). Understanding the common thread of Baldwin's identity process and Mercer's BAM may provide a connection between the two identities and aid in the development of a mother's identity as she becomes a mother scholar.

However, in the transition of entering into a dualistic identity as a mother in academia, she may, in some regards, be placed into a position of othering (Acker, 1994; Burke et al., 2019; Raddon, 2002) in which the woman's motherhood is focused upon as a difference that separates and disconnects her from the collective academic identity of those around her. A tangible effect of othering is seen when women conspicuously lose funding for their research after beginning a family (The Center for Work Life Law, 2017). Feelings of othering and maternal sidelining from self-identifying with one's discipline may lead a mother to minimize or disregard the dynamic shifting of identity she experiences as she transitions into BAM, furthering an internal, interpersonal, and institutional wrestling match among her identities.

It is important to note, however, that the process of birthing and becoming confident in one's academic identity arguably takes years, if not decades. This initiation of the redefining process of a woman's sense of self and identity through matrescence is marked by unquestionably accelerated changes in nearly every domain of a woman's life, including the biological, psychological, sociological, political, and spiritual domains (Athan & Reel, 2015). While feminist theorists and social-constructivists have sought to turn from a biological and embryological examination of motherhood toward an alternate view that recognizes the diversity and individuality of motherhood (Marshall & Woollett, 2000), there is still a rift between women's experiences and the experiences recognized by scholarly work (Athan & Reel,

2015). The idealized definition of good mothering evolves through the very practice of motherhood as negotiations of identity and life goals occur (Maher & Saugeres, 2007). A paradoxical view worthy of further exploration is the ability of motherhood itself to foster the success of a woman's academic role, shaping it in constructive and meaningful ways that may be unlikely to occur through any other form (Dickson, 2018; Huopalainen & Satama, 2019; Mazak, 2019).

Society postulates a silent and yet strangely loud discourse that places motherhood on a pendulum of definitions centered around identity and value (Arendell, 1999; Laney et al., 2014), and yet the diversity of life experiences and the very fact that motherhood is constructed through experience is neglected (Raddon, 2002). Motherhood is far from a hat that a woman can remove while conducting her academic duties and fulfilling her singular academic identity within an institution (Dunbar et al., 2023; Laney et al., 2014; Mileva-Seitz & Fleming, 2011). Identity, a deeply personal and abstruse concept, is one of constant construction, undergoing change based on experiences (Burke et al., 2019; Henkel, 2005). For the academic mother, her identities concurrently exist and interact with each other, shaping who she is and becomes. Therefore, the very practice of mothering defines a mother (Ruddick, 1989), and is an identity that will be inseparable from who she is (A. M. Young, 2015). Arguably, the very work of motherhood itself is one of scholarship and thinking (O'Reilly, 2009). Ruddick (1989) championed the understanding of motherhood as experiential, noting that while the institutions wherein mothers do life, including life with their children, cannot be separated from an understanding of motherhood; motherhood itself cannot be institutionalized. Instead, becoming a mother must be examined by the experiences of the mothers themselves.

As noted by Rose (2020), the reconciliation of the identities of academic and mother may be most fulfilling when given the space to overlap, and in the overlapping, recognizing the endless negotiation of caring for two individuals, both the child and the mother herself, in a dyadic unit rather than two separate entities, which fosters perinatal well-being (Moyer & Kinser, 2021). The power found in knowing, such as achieved through academic growth and expertise, along with that of motherhood, can lead to pleasurable and productive identities (Raddon, 2002). An academic mother's identity should not only be allowed, but fostered, as these roles elicit the embodiment of becoming a mother, a mother who nurtures and thinks deeply, both of which are noted in the literature to be a definer of women in academia (Angervall & Beach, 2018; Dickson, 2018; McDermott, 2020; Pillay, 2009; Westring et al., 2016).

An understanding of how institutions, such as the academy, can either serve to empower and foster what Ruddick (1989) calls the pleasure found in mothering is foundational to gaining a fuller grasp of an academic mother's experiences of becoming a mother. However, the transition into matrescence is still seen as a cultural liability, as the attitudes to new mothers in the academy and the workforce have shown to be begrudging and treating motherhood as inconvenient and incidental (De Marneffe, 2019; Colbeck & Drago, 2010; Laney et al., 2014; Pearson, 2023). Nevertheless, mothers in the academy are ridiculed for spending considerable time in a scholarly academic setting rather than in childrearing responsibilities (Raddon, 2002). In contrast, women are all the more critiqued for choosing to pleasure in the practice and identity found in motherhood (Berger et al., 2022) if it lowers the prestige of their role in the academy. There is hardly a middle ground for the academic mother, and assimilation to the ideal academic is fundamentally impossible (Carver, 2005; Esnard et al., 2017; Goode, 2000; Raddon, 2002).

Furthermore, gender is implicitly still seen as a reflection of academic prowess. Despite the equality between men's and women's research, teaching abilities, and student learning outcomes, women continue to be rated lower in their student evaluations of teaching and research than men, assumably due to gender bias, as male professors are perceived to have greater assertiveness, leadership, and confidence (Boring, 2017; Krawczyk & Smyk, 2016; Macnell et al., 2014). However, given the low rates of women in leadership roles, such may be an institutional bias perpetuating among students (Fan et al., 2019; Hideg & Ferris, 2016; Howe-Walsh & Turnbull, 2016; Johnson, 2017). Given this gender bias, all the more, a mother may need to veil not only the dynamic identity transitions of BAM, but even her physical appearance of motherhood during the first stage of BAM. These physical changes, including weight gain and health-related symptoms of pregnancy, have been shown to count against mothers in student evaluations, as pregnant mothers with these characteristics received lower teaching effectiveness scores than their non-pregnant female colleagues (Olabisi, 2021). These experiences may lead mothers to feel like the academy is reviving and redefining a rendition of the 19th-century photography practice of hiding the mother. In this practice, women cloaked themselves for photographs, with their bodies providing little more than a blank backdrop for the child's photograph (Athan & Reel, 2015; Nagler et al., 2013). This concept seems to mirror the onedimensional view of the academic mother, in which she must veil the perinatal experiences that transition her into her identity as a mother. She must remove her motherhood from her scholarship, allowing it to be, at best, a backdrop to her academic work. While the effects of doing such may temporarily help the mother conform to a version of the idealized academic, the long-term implications perpetuate an institutional attitude of normalcy towards the invisibility of motherhood that extenuates the immediate and long-term imbalance of gender, family, and

identity in academia (Raddon, 2002; Ysseldyk et al., 2019). Furthermore, setting a precedent that motherhood ought to be silently in the background of one's academic identity, hinders academic mothers from embracing both identities and mentoring young scholars to do the same. However, research continues to illuminate the vital need to recognize the impact of mentorship on a woman's well-being and success as a mother and a scholar (Hewerd et al., 1997; Danaei, 2019; Darvill et al., 2010; Guarino & Borden, 2017; Kaufman, 2021; Sarabipour et al., 2022; Straus et al., 2009). The generational effects of cloaking one's motherhood may communicate to the next that they, too, must walk the delicate balance of both identities, maintaining the path of resistance that women before had to walk (Cummins, 2012; Hillier, 2021; Jones, 2004; Kaufman, 2021). This attitude could lead to a Matthew effect (Merton, 1968; Teixeira da Silva, 2021), perpetuating the accumulated disadvantages of women mentioned throughout this chapter, all of which hinder the success of mentorship of future mother scholars and may also hinder the pervasive need for work-life integration to be acknowledged and, more so, become the custom of academia (Bartlett et al., 2021; Colbeck & Drago, 2010; Ollilainen & Solomon, 2014). Rather than hiding the maternal from the academic identity, the voices of mother scholars need to be heard (Rose, 2020). Soliciting an understanding of the lived experiences of academic mothers may provide insight and understanding into the existence of these identities, which may benefit the entire ecological system in which the mother interacts, and in so doing, address the leaking out of women in academia by destignatizing the either/or mentality of academia and motherhood as women in academia make their motherhood visible and foster mentorship to women following in their path (Memorial's Education Writing Group, 2017; Wolf-Wendel & Ward, 2006; D. S. Young & Wright, 2001).

Summary

The existing literature defines the pathways and challenges women have faced in the workforce, specifically in the historically male-centered institution of academia (Schoening, 2009; Wolf-Wendel & Ward, 2006). While women have shown competency, there remains a gap in their achievement and progression within the academy (Treviño et al., 2018). Upon examination, the phenomenon of leaking or opting out brings forth a myriad of reasons why women may leave the academy (Schneider et al., 2011). Furthermore, the literature shows that the specific period of early motherhood, including the stages that a woman walks through in becoming a mother, is particularly difficult and filled with physiological, psychological, and sociological challenges (Athan & Reel, 2015; Javadifar et al., 2016; Nelson, 2003), all of which seemingly contradict the identity that women are to have in the academy. However, for mothers in academia, the perinatal transitionary period of becoming a mother has received little attention as it pertains to the transitioning identity of women scholars (Fothergill & Feltey, 2003; McDermott, 2020; Rose, 2020) and how the perinatal period affects their experiences of continuing in their career progression (CohenMiller, 2020; Huopalainen & Satama, 2019). By examining the lived perinatal experiences of mothers in academia, their voices can shed light on the transition of BAM (Rose, 2020) and how academic institutions can support and encourage their participation in the academy (Falletta, 2020). Furthermore, providing insight into the transitions of BAM in academia may serve to identify risk factors that may pertain to mothers in this field and potential ways to mediate the challenges they face.

CHAPTER THREE: METHODS

Overview

The purpose of this hermeneutic phenomenological study was to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences may affect their maternal and academic identities and outlook on continuing in the academy. This chapter details the foundation of the research design, the study's central and sub-research questions, and the study's setting and participants. To understand the framework from which this study was conducted, the researcher's positionality and the procedures that were used are discussed to show an ethical path to participant recruitment, which leads to a discussion of the data collection and analysis plan. This chapter concludes with a discussion of steps implemented to increase the study's trustworthiness.

Research Design

Qualitative research goes beyond measuring a phenomenon and seeks to address the meaning associated with its experience (Creswell, 2013). While quantitative studies delineate the percentages of women in academia (Johnson, 2017; National Center for Education Statistics, 2022; Shreffler et al., 2019), less attention is given to the roles and identities of mothers in academia. Furthermore, a qualitative gap exists in centralizing the mother's perinatal experiences as both an academic and as a mother and how these experiences may affect her outlook on continuing in the academy. The component of the effect the perinatal period may have upon a mother's continuation in the academy may also serve to further the literature on why women leak out or opt out of the academy. Nonetheless, motherhood remains a complex subject for women in academia (Gabriel et al., 2023; Mason et al., 2013; Rose, 2020), which is why it is important to grasp the meaning associated with its experience (Creswell, 2013). Therefore, qualitative

research is crucial in going beyond quantifying the data of the phenomenon and seeking the essence of the phenomenon.

Through an interpretive and naturalistic attitude toward the world (Denzin & Lincoln, 2011), qualitative research addresses an individual's life experiences. Rather than abstractly addressing a phenomenon, phenomenology's research design turns to life experience, the living through the experience rather than a theory of the experience (van Manen, 2016). van Manen (2016) posited that a phenomenological position toward qualitative research fosters the examination of the methods and ways individuals shape and partake of the world around them. Qualitative research postures a reflective nature to human experience (van Manen, 2016), fostering meaningful descriptions of the lived experiences of individuals within their natural setting (Creswell & Poth, 2018).

Therefore, a phenomenological research design was applied to ground the reality of the meaning mothers ascribe to their perinatal experiences in academia, how these experiences affect their maternal and academic identities, and their outlook on remaining within the academy. Phenomenologists seek to describe the essence and commonality of several individuals' lived experiences of a specific and shared phenomenon or concept (Creswell & Poth, 2018). Phenomenologists attempt to determine the essence and meaningful experience derived from the nature of the phenomenon, seeking to extract the things that matter (van Manen, 1990, 2016). For this study, the things that matter are grasping the essence of the phenomenon of the perinatal experiences of mothers in academia and the effect these experiences have upon their identity as a mother and academic. van Manen (2016) stated that grasping an individual's lived experiences is a reflective experience of the past which holds implications for the sum of life. Therefore, to better understand the phenomenon of study, I sought to explore the essence of a woman's

perinatal transition and development of her maternal and academic identities as she experiences matrescence, the becoming of a mother, while in academia (Raphael, 1975; van Manen, 2016). Furthermore, the phenomenological study of women's experiences will set the framework for a deep and rich understanding of women's ongoing challenges in academia, particularly as they transition from academic to mother scholar. In order to best capture the texts of these women's lives and lived experiences, the hermeneutic phenomenological approach was applied (van Manen, 2016).

While hermeneutic phenomenology cannot comprehensively explain the phenomenon, it facilitates a dialogue that serves as a window, offering "the possibility of plausible insights that bring us in more direct contact with the world" (Powers, 2015; van Manen, 2014, p. 66). The participants serve as the window, bringing the researcher into a more direct and clear contact with the participant's lifeworld. Therefore, the researcher serves as a prominent figure in the reflective process, and the phenomenon of study is not only relevant, but also deeply meaningful to the researcher (van Manan, 2016). In the position of the researcher and a mother thrice over, I articulate my pre-understandings by discussing my experiences and biases (Gadamer, 1975) in the sections on the researcher's role and data synthesis in this chapter. In the role of researcher, I practiced reflexivity and articulation of how my experiences shape and aid the way I interpreted the phenomenon, as told through the participant's words and lived experiences (van Manen, 2014).

Research Questions

The following research questions served to bring meaning to the purpose of this study.

The central research question guided the examination of the meaning the participants ascribed to their lived experiences. The sub-research questions helped move the study from a broad

overview of the phenomenon to a rich meaning that formulates the phenomenon's essence.

Central Research Question

What are the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identity?

Sub-Question One

How do a woman's academic identity and professional pursuits affect her experiences and perceptions of becoming a mother?

Sub-Question Two

How do the experiences of becoming a mother affect a woman's academic identity and professional pursuits?

Sub-Question Three

What support systems foster the well-being of a woman's transition into becoming a mother within academia?

Setting and Participants

The following sections discuss the research setting for the study and why it was chosen.

The method of selecting the sample population will also be discussed. This section concludes with a broad description of the participant criteria, which will be expanded upon in Chapter Four.

Setting

This study took place in the United States (U.S.). Academic institutions in various countries are organized similarly, yet there are various nuances and cultural implications unique to each country. Therefore, the related literature within Chapter Two predominately focused on mothers in academia in the United States. Furthermore, given that the setting of the study included a large geography and a great distance between me and the participants, the setting also

utilized the internet. The internet has been shown to be a powerful tool for data collection and research as well as communication (Rooney, 2016). The internet is also prevalent and largely utilized in the U.S among mothers and academics (eMarketer, 2017; Martin et al., 2020). Given that the participants were both academics and mothers, the use of the internet further accommodated the scheduling challenges that accompany these roles and facilitated the child's presence during the interview to alleviate potential distress and childcare strain (Millet et al., 2018). Microsoft Teams was chosen for the video conference interview with participants.

Participants

The participants for this study were women who became a mother with their first child within the last seven years of the study's initiation while holding a faculty position in academia that included teaching, scholarship, and service responsibilities while pregnant and during the first nine months postpartum, having had a singleton birth. Singleton births comprised 96.8% of the births in 2020; therefore, mothers of singletons represent a more significant portion of the demographic of birthing mothers (March of Dimes, 2022). In order to capture the lived experiences during both the prenatal and postpartum periods, and to increase participation, the time frame of seven years postpartum was chosen. Given the importance of the life events that occur during the perinatal period, the autobiographical memories constructed are the "content of the self and define who we are, who we have been, and, importantly, who we can yet become" (Conway & Williams, 2008, p. 893). These emotional and personal autobiographical memories are crucial to gathering the lived experiences of the individual. Women have been found to generally remember the events of their birth 20 years postpartum (Simkin, 1991) and significant accuracy has also been found at five years postpartum (Takehara et al., 2014). These reasons support the inclusion of mothers up to seven years following the birth of their child. Finally,

despite the effort to examine the perinatal period up to one year following birth, under Mercer's (2004) becoming a mother theory (BAM), one's maternal confidence is most often salient around four months postpartum, though Rubin (1967) viewed the occurrence of maternal role attainment around eight to nine months postpartum; therefore, the inclusion of participants at nine months postpartum was chosen.

The study included 10 participants, which is the required number of participants per Liberty University's School of Education. Creswell and Poth (2018) recommend five to 25 participants for a phenomenological study, and Moser and Korstjens (2018) recommend 10 participants or fewer. van Manen (2014) refrained from providing a numerical number of participants, but rather encouraged a pool of experiential narratives that provides a depiction of the experiences that enable "contact with the life as it is lived" (p. 353). As such, data saturation was the guiding principle for determining the sample size (Cleary et al., 2014; Creswell & Poth, 2018; Lopez & Whitehead, 2020). Therefore, participant selection continued until sufficient data was obtained to achieve a rich and detailed description of the phenomenon (Patton, 2015). Given the scope of the phenomenon, along with my understanding of the phenomenon (Morse, 2015), while I accounted for up to 20 participants in this study, I achieved data saturation at 10 participants wherein additional data would have only produced redundant information, and closure on the phenomenon was reached (Moser & Korstjens, 2018). The participant profiles can be found in Chapter Four, and a brief overview of demographics is provided below in Table 1.

The sampling procedures that were used to solicit participants who met the criteria for the study were convenience sampling, snowball sampling, web-based respondent-driven sampling (webRDS), and purposive sampling (Moser & Korstjens, 2018). Each sampling procedure is further described in the procedures section of this chapter.

Table 1Participant Profiles

Participant	Age at Time of Study	Marital Status	Discipline	Public or Private Institution	Tenure or Tenured Track
Heather	37	Married	Education and mental health	Private not- for-profit	Tenured
Alice	36	Married	European literature and cultures	Private not- for-profit	Tenure track
Jayla	36	Married	Environmental studies	Private for- profit	N/A
Alicia	41	Married	Psychology	Public	N/A
Olivia	34	Married	Physical therapy	Private not- for-profit	N/A
Lydia	39	Married	Public health	Public	Tenured
Ada	41	Married	Education	Public	Tenured
Jazmin	34	Married	Public health	Private not- for-profit	N/A
Samantha	39	Married	Occupational therapy	Public	Tenure track
Erin	36	Married	Health science and women's studies	Public	Tenure

Researcher Positionality

The motivation for conducting this study was based upon the following: (a) my work and research in academia, (b) my perinatal experiences through three singleton births, (c) the reading of scholarly journals, blogs, social media posts, and popular literature from women in the academy who struggle through their identities and responsibilities associated with each role, and (d) the documented challenges for women in academia, especially those who are mothers or may

want to become mothers (Carver, 2005; Esnard et al., 2017; Gangl & Ziefle, 2009; Goode, 2000; Marneffe, 2019; Raddon, 2002; Wolfinger et al., 2008). These motivations compelled the need to give voice to the experiences and meaning women in academia ascribe to the transition of becoming a mother within the academy, furthering the body of research and providing insight and recommendations for institutional awareness and maternal well-being. With this aim in mind, I sought to undergird the validity and trustworthiness of my study (Ary et al., 2019; Mills & Gay, 2019) by articulating my researcher positionality, including why I chose to use the transformative framework as the interpretive framework for this study, my philosophical assumptions that influenced the study, and my contributions as the human instrument in the study.

Interpretive Framework

The interpretive framework that undergirded this study was the transformative framework, wherein the purpose of knowledge is to aid people and progress society (Mertens, 2003). Women have experienced marginalization in academia since its inception (Malkiel, 2017; Parker, 2015). Though remarkable progress in the inclusion and acceptance of women in academia has been made, mothers continue to experience not only a glass ceiling, but also a maternal wall in academia (Elacqua et al., 2009; Shreffler et al., 2019; Treviño et al., 2018). Women have historically been discredited, marginalized, and ignored based on their distinctive female reproductive anatomy (National Academies of Sciences, Engineering, and Institute of Medicine, 2007; The U.S. Equal Employment Opportunity Commission, 2008), with such archaic assumptions and stigmatization being seen even in the classification of women's natural emotions as mental disorders in the 1900 BCs (Tasca, 2012). Nevertheless, today, mothers continue to face marginalization in academia based on their reproductive experiences (Mitchell-

Eaton, 2021), which was why the transformative framework was chosen. The transformative framework calls for participatory action that raises the voices of marginalized groups, perinatal women in academia, to promote understanding that will lead to the betterment of the participants' lives and the institutions in which they live and work (Creswell & Poth, 2018).

With a background in psychology, I saw the importance of examining social science theories while providing individuals with a voice, utilizing an epistemological assumption in noting the validity of the participants' experiences, and empowering them to improve their lives and shared institutions. As an academic instructor, a woman, and a mother, my experiences influenced my collaboration with participants rather than simply inquiring into their experiences (Creswell & Poth, 2018). My worldview, or paradigm, further influenced my interpretive framework (Creswell & Plano Clark, 2011).

Early in my education, I was taught that one's worldview encompasses one's views on humankind's origin, identity, meaning, morality, and destiny. With a biblical worldview, these components point back to God. Humankind's identity is encompassed through a creation view of God as Creator and Sustainer of the world, who formed humankind in His image, giving them an identity unlike any other creation (English Standard Version, 2001/2016, Genesis 1:1, 27; Colossians 1:16-17). Because of God's design, humankind is endowed with an identity encompassing an inherent meaning for God's glory (Psalm 8:5; Matthew 28:18-20). The morality by which humankind is called to live is based on absolute truth laid out in God's Word (Exodus 20:1-17; Matthew 22: 37-40). At the end of one's life, one's eternal destiny will be determined by whether one repented of their sins and placed their faith in Christ or not (Romans 6:23; Ephesians 1:13-14). My worldview influenced my research positionality and choice of a transformative framework. I valued each participant as an image-bearer of God, recognizing that

her identity as a mother and academic has an eternal purpose. My positionality calls me to stand against the disparities among marginalized women as I seek to honor God. Among these disparities is how academic institutions and society's culture understand, address, and support women in their identities as both mothers and academics, which is why I resonated with the transformative framework.

Philosophical Assumptions

When examining qualitative research, it is important to understand the researcher's beliefs, values, and theories that undergird their interpretive framework and influence how they approach their research (Creswell & Poth, 2018). The researcher plays a fundamental role in collecting, analyzing, interpreting, and representing the study's data. Therefore, understanding the philosophical assumptions that the researcher holds is vital to the research process and application. There are three overarching assumptions through which a researcher approaches their qualitative study, the first of which is their ontological assumptions.

Ontological Assumptions

Ontological assumptions address the fundamental question of what is (Nasution, 2018; Olson, 2007). What is the reality in the world's physical, social, and spiritual contexts, and how are individuals and their perceptions of reality embraced? As a Christian qualitative researcher, I believe that reality and one's existence in it are found in God and His created order of the world. I also believe we live in a fallen and sinful world, but there is hope through Christ and the redemption He brings to our fallen reality (English Standard Version, 2001/2016, Romans 5:12-19). While I do not believe that multiple temporal realities exist, I do believe one's perceptions shape their view of reality and that these subjective experiences are authentic and significant. My ontological assumptions directly affect my epistemological assumptions.

Epistemological Assumptions

A researcher's epistemological assumptions are what drives and focuses their acquisition of knowledge (Creswell & Poth, 2018) which must seek to minimize the space between the researcher and their participants (Guba & Lincoln, 1988). My goal is to respect the lived experiences of individuals and accurately represent their perceptions and stories. I do this by immersing myself in the field and getting to know my participants, therefore removing distance so that I can understand their experiences firsthand and through their lens. Through proximity and trustworthy and honest inquiry with participants, I was able to gain insight into women's subjective perinatal experiences within academia. By understanding the participant's subjective experiences, insight into the phenomenon of the transition of a woman's academic and maternal identities fostered a better grasp of the whole: an academic mother's perinatal experiences within the institution of academia and her outlook on her academic career. In pursuing this knowledge, my researcher positionality as a mother in academia and a history of maternal mental health research unquestionably impacted how this study was approached.

Axiological Assumption

The values a researcher brings to their study can be examined under the axiological assumption. My interpretive biography includes my positionality as a woman who has given birth and as a mother in academia who has walked through the transition of identities and physiological, psychological, and sociological transitions accompanying a woman's emergence into matrescence. Through transparent admittance that my research was value-laden, my personal biases were made known, and I could position myself within the study (Creswell & Poth, 2018). Acknowledging my assumptions provided a foundation for my interpretive framework and further credibility for my research.

Researcher's Role

The foundation of hermeneutic phenomenological study places the researcher as the human instrument in the study. In this role, I investigated and interpreted the meaning of the participants' lived experiences and the phenomenon's essence (Lincoln & Guba, 1985; van Manen, 2016). The human instrument brings meaning and understanding to human experiences through their innately human qualities of emotion and intellect (Peredaryenko & Krauss, 2013; Sanjari et al., 2014). As the human instrument, it was essential to note that in my relationship with the study's participants, I held no authority over them, nor did I attempt to exercise such as their participation was entirely voluntary. However, due to my life experiences, I was positionally an insider, though as the researcher, I may be typified as a reciprocal collaborator (Rowe, 2014).

As a woman, mother, and academic, I self-identified with the participants, which is why the hermeneutic phenomenological qualitative research method was chosen. van Manen (2016) notes that hermeneutic phenomenology is a human science in which the researcher comes with an existing interest in the topic of study. Therefore, the researcher's experiences are integrated into the meaning-making process (van Manen, 2016). Rather than practicing epoché (Moustakas, 1994), my experiences were made known so that my assumptions and beliefs were explicit.

I have given birth to three children, am presently teaching in an adjunct role within academia, and have studied perinatal mood disorders since my master's degree. I have also presented at psychology conferences and an academic mental health podcast on the topics of perinatal mood disorders and matrescence. Through the act of reflexive writing and bridling of these experiences, I acted as a mediator, taking account of the phenomenon's meaning as

conveyed through the text of the participants' lived experiences (Stutey et al., 2020; van Manen, 2016). In my qualitative role as the human instrument, my experiences collaborated with those of the participants to interpret the data of their lived experiences and open myself to the discovery of the phenomenon's essence (van Manen, 2016)

Procedures

The following sections discuss the research design, including the required approvals for the study's initiation, the methods for selecting the sample population, and a broad description of the participant criteria, which is expanded upon in Chapter Four. Additionally, the data collection methods and data analysis procedures are discussed, and attention given to the methods used to account for the study's trustworthiness and credibility.

Permissions

Prior to collecting data, the first procedure required to ensure the integrity of this study was approval from Liberty University's Institutional Review Board (IRB). The IRB approval letter is found in Appendix A. Following the submission for IRB, initial contact within my personal network was made to solicit assistance in sharing the study with their contacts (Moser & Korstjens, 2018). Six colleagues agreed to share the study once IRB approval was granted, which snowballed into providing two additional gatekeepers for a total of eight individuals who agreed to share the recruitment letter once IRB approval was granted. This form of convenience sampling naturally lends itself to phenomenological studies as the foundational tenant for participants is the experience of the phenomenon (Astroth & Chung, 2018; Schreirer, 2018). Once IRB approval was granted, Web-based respondent-driven sampling (WebRDS) was initiated by contacting social media page administrators utilizing the Facebook platform to request permission to share the social media recruitment post found in Appendix D. Permission

was granted within six academic mothers-only social media pages. These sampling methods and recruitment through known contacts and networking occurred as outlined in the following recruitment plan.

Recruitment Plan

As noted in the permissions section, the various sampling and networking methods for participant recruitment were employed once IRB approval was granted. The sampling procedures for this study consisted of convenience sampling, snowball sampling, WebRDS, and purposive sampling. Each sampling and associated recruitment method was chosen to enable the selection of participants from various academic settings whose lived experiences represent the study's aim.

As noted in the permissions section, the initial method of sampling occurred through convenience sampling of professional colleagues and a friend who was willing to share the study criteria with potential participants (Stratton, 2021). Convenience sampling rolled over to snowball sampling, in which participants aided in sharing the study with prospective participants through their connections (Goodman, 1961; Patton, 2015). In conjunction with convenience and snowball sampling, WebRDS, was employed. WebRDS is a form of respondent-driven sampling that occurs solely through the web (Helms et al., 2021). The use of WebRDS facilitates the use of social media platforms to recruit participants and is an appropriate recruitment method for the study's demographic, as 96.2% of mothers were internet users in 2017 (eMarketer, 2017) with 87% of U.S. mothers utilizing Facebook for social media purposes (Waring et al., 2023).

With the exception of participants recruited through WebRds, all other potential participants were sent the recruitment letter, provided in Appendix C, which provided a synopsis of the study and a link to a Google Form, from which they were provided the informed consent as the first page, followed

by a short-answer questionnaire (see Appendix D). In an effort to protect participants' self-determination and well-being, the completion of the informed consent was required (Byrne, 2001). The informed consent included a general description of the purpose of the study, that participation was voluntary, and clearly articulated the right to withdraw at any point in the study (Johnson & Christensen, 2020). There was also an explanation of the expectations from participants and how appreciation through compensation would be given once all data collection methods were completed. Once the informed consent was signed, the participant proceeded to the questionnaire, which is found in Appendix E. To maintain the participants' confidentiality, they were asked to choose a pseudonym. If a pseudonym was not chosen, I assigned one on their behalf (Bailey, 2018). To maintain the participants' privacy, access to these forms were password protected, to which only I held access. In reviewing the questionnaires, purposive sampling was utilized to ensure that the participation criteria were met (Moser & Korstjens, 2018) and to gather preliminary demographics of the participants.

In an effort to ensure data saturation, 18 participants were recruited from those who signed the informed consent letter and completed the questionnaire, and data saturation was achieved at 10 participants. The informed consent provided each participant with information regarding their privacy, ownership, and confidentiality (Rossman & Rallis, 2017). The informed consent further detailed the intentions and protections in place to safeguard the participant's identity, including the geographical location of their academic institution of employment and name if provided, through alterations and pseudonyms to minimize deductive disclosure (Kaiser, 2009). The individuals who expressed an interest in the study but were not selected were notified by email with expressed gratitude for their interest in the study, and all information obtained was destroyed.

Data Collection Plan

For this study, three data collection methods were employed to facilitate a rich understanding of the participants' lived experiences (Rubin & Rubin, 2012; van Manen, 2016), increasing the validity of the findings, and utilizing data triangulation procedures (Denzin & Lincoln, 2011; Rubin & Rubin, 2012). The three participant-involved data collection methods were (a) questionnaires, (b) interviews, and (c) a letter-writing exercise. The presentation of these data collection methods is in order of operation, beginning with the first data collection method of questionnaires, which were utilized to gather preliminary and biographical information about each participant. Following data analysis of the questionnaires, one-on-one semi-structured interviews took place. Lastly, participants were asked to complete a letter-writing exercise in response to pre-determined prompts. In order to establish the rigor of this study (Patton, 2015), the following section outlines each form of data collection, beginning with questionnaires.

Questionnaire

Once a participant signed the informed consent, she was given access to the questionnaire (see Appendix E), which was used to gather preliminary participant information and is regarded as direct data (Lopez & Whitehead, 2020). The questions are based on the related literature noted in Chapter Two, the researcher's experiences with the phenomenon, and the study's theoretical framework. In addition to gathering data from each participant, the closing portion of the questionnaire provided the participants with a general understanding of terminology related to the study and the interview that followed, including the terms: becoming a mother, maternal confidence, matrescence, perinatal, postpartum, work-family conflict, work-life balance and integration. The questionnaire was administered through the platform Google Forms, for which a

secure link was made available to participants. To maintain the participants' privacy, access to the completed forms was password protected, to which only the researcher held access. Once submitted, the questionnaire was downloaded from Google Forms, and each participant's questionnaire was reviewed and uploaded into ATLAS.ti, a Qualitative Data Analysis Software (QDAS).

The questionnaire contained specific, open-ended questions to explore several key aspects of the participant's life as they pertained to the research study. The questions briefly investigated the participant's work history and responsibilities at the institution where she was employed during the perinatal period. Questions broadly examined the participant's prenatal period, including her pregnancy, concerning her work and academic responsibilities. General inquiry was made into the participant's prenatal and postpartum health (physiologically and psychologically), including any complications that could have impacted her experiences as she transitioned into her role as a mother and academic. There were questions about her choice to use maternity leave or stop the clock (STC) policies. Once the questionnaires were received, the participants were contacted to schedule a one-on-one semi-structured interview.

Questionnaire Data Analysis Plan

As noted, ATLAS.ti, a QDAS was used to streamline the examination of the raw data gleaned throughout the data collection process (Jensen, 2017). It should be noted that ATLAS.ti served as an organizational tool and should not be mistaken for an automated data analysis software. After the questionnaires were uploaded into ATLAS.ti, each was slowly read to develop a baseline of information and an initial profile of each participant (Patton, 2015). This baseline was used to gather the participants' experiences and aided in positioning their experiences within Mercer's (2004) BAM theory and Bronfenbrenner's (1979, 2005)

bioecological systems. The answers from the questionnaires were also reviewed to gather a timeline of events involved in the phenomena, comparing the participants' experiences to one another to look for similarities and anomalies, providing insight into both the shared and unique experiences surrounding the phenomenon.

The questionnaires were then initially coded, utilizing inductive and deductive codes. Coding served as the transitional process (Saldaña, 2016) that made the crucial connection between collecting the data and explaining its meaning (Charmaz, 2001). The questionnaire data was also utilized to develop deductive codes that were applied to the data analysis of the transcribed interviews. The study then proceeded to data collection through semi-structured interviews.

Individual Interview

The interview is a fundamental phenomenological process of asking questions to seek and make meaning of the phenomenon (Brinkmann & Kvale, 2015; van Manen, 2016). When asking questions, it is essential to remember that the aim of these questions is not to find a solution, but rather to provide the researcher and others with the information needed to act with care, respect, and thought for the benefit of engaging with the phenomenon (van Manen, 2016). Interviews were conducted one-on-one, in a semi-structured conversational approach, utilizing the video conference platform of Microsoft Teams. A password-protected smartphone was also used to provide redundancy in capturing the audio recording of the interview. Elwood and Martin (2000) noted the importance of considering the interview site as it embodies "multiple scales of spatial relations and meaning" (p. 649), and these relations intersect the social relations in the interview. The chosen interview site may also impact the participant's perception of power and positionality between us. Therefore, inviting the participants to engage in the Microsoft

Teams call around their schedule, in the location of their choosing, afforded a redistribution of power and equality, further establishing the conversational nature of the interview.

The video recording capabilities of Microsoft Teams also facilitated the observation of the attributes of the spaces chosen for the interview, which provided important data that enabled a greater understanding and interpretation of the interview (Elwood & Martin, 2000). Given the review of work and family presented in Chapter Two, both the location and timing of the interview aided in providing insight into the workload dynamics of each participant.

Furthermore, I intentionally sought to accommodate the participant's responsibilities as an academic and caregiver. Participants were invited to include their child during the interview to alleviate potential separation distress and childcare strain (Millet et al., 2018). Three participants included their child in a portion of their interview.

The semi-structured interview approach was chosen to provide a roadmap for the interview and continuity during data analysis, as the same question guide was utilized with each participant. In addition, the receptive model of interviewing was used, which allowed for plasticity in the interview process. As warranted, there was flexibility to adjust the questions for clarity, to explore further the participants' responses, including those of the questionnaire, or to reflect the natural flow of the conversation (Brinkmann & Kvale, 2015; Rubin & Rubin, 2012). The interview commenced with a few background and introduction questions before proceeding to a grand-tour question, which gave the participant a big-picture view of the interview path and invited them into the conversation (Marshall & Rossman, 2012). The following was the semi-structured interview protocol, also found in Appendix F.

Individual Interview Questions

- Would you share a bit about your background, such as where you are from and your upbringing, including the dynamics of your parent's/caregiver's work and whether your mother worked outside the home? CRQ
- 2. What factors shaped your desire to pursue a career in academia? CRQ
- 3. What are some of the experiences, particularly as a woman, that led to developing your academic identity? CRQ
- 4. Before motherhood, how would you describe your identity in academia as a woman, and did you foresee motherhood being integrated into this identity? CRQ
- 5. Would you explain your experiences with other mothers in academia during your doctoral work and within your current role in academia? CRQ
- 6. When you found out you were pregnant, what were your initial thoughts and feelings?
 CRQ
- 7. Would you describe the experience of revealing your pregnancy to your supervisor and colleagues and your perceptions of their support? SRQ2
- 8. Reflecting upon your pregnancy, were there any situations or experiences that influenced your ideas of motherhood within academia, either positively or negatively? SRQ2
- 9. How would you describe yourself/your identity during the prenatal period? CRQ
- 10. Describe how your work responsibilities influenced the ways in which you were able to prepare physically and emotionally for the arrival of your child. SRQ1
- 11. During your pregnancy, what were your expectations for returning to work after the birth of your child? SRQ2
- 12. Would you describe the impact of your child's birth on your maternal identity? CRQ

- 13. In what ways did you experience an overlap of your academic identity and responsibilities during your parental leave? SRQ1 & SRQ2
- 14. How would you describe your transition into motherhood during the early postpartum period? CRQ
- 15. At what point in the perinatal period did you begin to think of yourself as a mother? CRQ
- 16. What were your feelings toward returning to work at the end of your parental leave?
 SRQ1 & SRQ2
- 17. What were your initial experiences when you re-entered academia after your child's birth? SRQ1 & SRQ2
- 18. What were some of the logistics specific to motherhood and academia that you had to manage during the first-year postpartum? SRQ1 & SRQ2
- 19. What were some of the challenges you experienced within the academy during the first year postpartum, and how did this affect your transitioning identities of becoming both a mother and an academic? SRQ1
- 20. During the perinatal period, how do you believe your work in academia affected your maternal confidence? SRQ1
- 21. How did your physical (physiological changes and health) and psychological (stress, burnout, anxiety, mood disorders, etc.) perinatal experiences affect your role and identity in academia? SRQ2
- 22. How did the perinatal physical (physiological changes and health) and psychological (stress, burnout, anxiety, mood disorders, etc.) demands of academia affect the development of your maternal identity? SRQ1

- 23. Though the presence of female faculty is no longer an exception in higher education, did you experience a change in the perception of your capabilities or dedication to academia after becoming a mother? SRQ4
- 24. As a working mother in academia, what was your perception of the expectations placed upon you, whether said or unsaid, by society and your academic institution? CRQ
- 25. Reflecting upon your workload during the perinatal period, what were your expectations compared to reality? SRQ2
- 26. In considering your responsibilities in scholarship, service, and teaching, how has becoming a mother impacted or how do you anticipate it impacting how you dedicate your time to each responsibility? SRQ2
- 27. In what ways did your maternal and academic roles change your work-life relationship?

 SRQ1 & SRQ2
- 28. Could you describe any specific instances in which you felt that your responsibilities and identities as a mother and academic were at odds? CRQ
- 29. What experiences did you have in the attitudes and family friendliness of the academy, both staff and students, during the perinatal period? SRQ3
- 30. What resources and support do you feel a mother most needs from the academy during the perinatal period? SRQ3
- 31. Would you please describe your support system during the perinatal period and their affect upon your transition into BAM? SRQ3
- 32. In what ways did your support system (including those in academia) affect your academic identity during the perinatal period? SRQ3

- 33. In what ways do you believe your perinatal experiences within academia shaped your view of motherhood? SRQ1
- 34. In what ways do you believe the perinatal experiences of becoming a mother shaped your view of academia and your identity as an academic? SRQ2
- 35. The metaphor of the superwoman has applied to working moms who feel that they must not relinquish any of their responsibilities, but rather manage it all. Could you describe ways in which you experienced this, if at all, during the perinatal period? CRQ
- 36. Overall, how has motherhood affected your outlook on your career in academia? SRQ4
- 37. Is there anything else you would like to include in our discussion that you believe to be important in the transition of becoming a mother in academia during the perinatal period?

 CRQ

The first three questions provided a concise biographical introduction of each participant, which then lead into question four, providing a grand-tour (Marshall & Rossman, 2012), laying the framework for the central research question, and gathering a baseline of the participant's perception of the phenomenon of an identity as a mother in academia. The interview proceeded from the grand-tour question by asking subsequent questions that built upon the participants' narrative of their lived experiences of the phenomenon. The questions were intentionally arranged in a semi-chronological order to help walk the participants through retelling their experiences as they related to the central and sub-research questions (Deterding & Waters, 2021).

After the fifth question, the interview transitioned to inquire into the participants' early stages of matrescence, which occurs during the prenatal period. Questions examined how this first stage of becoming a mother was experienced within the academy. The interview questions

then focused on mothers' experiences transitioning into the early stages of welcoming their child and how those experiences affected their academic and maternal roles.

The remaining interview questions sought to further understand the mother's development and changes to her maternal and academic identities during the first year postpartum. The remaining questions were taken from concepts in Chapters One and Two on becoming a mother, work-life balance, maternal wall bias, and the mother's ecological systems' influence on her identity and experiences during the perinatal period in academia. The interview concluded by soliciting any untold experiences that the participant wanted to share based on the CRQ.

At the interview's close, the participants were thanked for their valuable contributions to the study. Several participants expressed that the interview was therapeutic, which aligns with Roberts' (2020) findings that interviews can facilitate therapeutic processes. Therefore, each participant was offered verbally or through email a document containing additional information on postpartum mental health, found in Appendix G, along with a link to a directory for mental health professionals should participants have desired to discuss further any of the experiences they shared during the interview. The participants were then given instructions for the final data collection method.

Individual Interview Data Analysis Plan

The interviews were conducted and recorded through Microsoft Teams, which has a transcription function within the program to automatically transcribe the recording. For redundancy, the interviews were also recorded on my password-protected iPhone. The interview data was then uploaded into ATLAS.ti. To ensure the accuracy of the transcript, an intelligent transcription method was used, and each interview was methodically and slowly listened to while

reviewing the transcript. I continuously paused and relistened to the interview recording to ensure corrections were made to accurately capture the participant's words (Agar, 1980; McMullin, 2021). In this process, I also removed all identifying language, which included the change of a child's name to either baby or child as bracketed in the quotes found in Chapter Four. Significant pauses or reactions that may not have been captured by transcription software were also included. There were instances in which a noticeable pause indicated the participant was slowing down between the stimulus of the question and the response of their answer; it was apparent that this time was used to engage in ongoing reflection and to decipher the wording of their answer. There were times that participants chose to gently structure their response out of regard for their institution, and other times in which participants felt freedom to be honest with their conversation. There were noted pauses and laughter in most interviews, which also provided important information and served as a source of data in the qualitative interview process (McGrath et al., 2018). These noticeable intonations and emotional reactions such as, deep reflection, discouragement, sadness, and regret, were latter drawn upon in the coding process (Lapadat, 2000; McMullin, 2021).

In an effort to ensure the accuracy of the transcription and the trustworthiness of the data, member checking was practiced by emailing each participant a copy of their transcript (Doyle, 2007; Lincoln & Guba, 1985). The participants had ten days to respond to the transcription of their interview, noting any revisions or questions regarding their transcript. This step aided in the study's credibility and facilitated more in-depth reflection for participants (van Manen, 1990). Nine participants responded and affirmed the transcription, and after ten days, the tenth participant's passive acknowledgment was accepted as her approval of the transcript. I continued to immerse myself in the data by purposefully and slowly listening to the interviews, pausing to

reflect on field notes and memos that were made following the interview, while keeping in mind that data analysis is the most complex and continual part of the qualitative research process (Dicicco-Bloom & Crabtree, 2006; Thorne, 2000).

Given the emergent nature of hermeneutic phenomenology, following a prescribed protocol of data analysis is challenging (Crowther & Thomson, 2020; van Manen, 2014). Though van Manen (2016) proposed examining the four lifeworld existentials through which to explore and unearth the essence of the participants' lived experiences, as a novice researcher, I chose to also integrate insights from Saldaña (2016) to provide a footing for the data analysis. The following outlined process of coding and data analysis used in this study integrated reflection upon van Manen's work, including the four lifeworld existentials of the lived body, lived time, lived space, and lived human relations, along with thematic analysis (TA) (Braun & Clarke, 2006; Rich et al., 2013). Therefore, qualitative coding, while a debated data analysis method (Day, 1999; Hendry, 2007), was a foundational step in the data analysis procedures for this study (DeCuir-Gunby et al., 2011).

The qualitative coding process aims to take unstructured data gleaned through the predetermined data collection methods and systematically study it to extrapolate codes, patterns, and themes for analysis. Fundamentally, the data coding process is cyclical (Saldaña, 2016), requiring time and persistence (DeCuir-Gunby et al., 2011). In order to achieve a thorough and trustworthy process of data coding and, thus, data analysis, I took a two-phase approach to coding (Saldaña, 2016).

The first phase included repetitive reading of the transcribed data (Giorgi, 1985), followed by initial coding. Initial coding aids in addressing the epistemological exploration of the participants' experiences and was generated using a deductive and inductive coding

approach (Saldaña, 2016). The deductive approach provided a preliminary framework for the data using codes based on the existing literature and the semi-structured interview questions (Creswell & Creswell, 2015; Deterding & Waters, 2021; Ryan & Bernard, 2003). Furthermore, an *a priori* approach to specifying particular codes was recommended by Saldaña (2016) when exploring a phenomenon related to identity, which was a crucial component of this study.

The deductive approach also included a fundamental hermeneutic tenet of drawing upon my lived experiences of the phenomenon from which preliminary codes were derived. Once the initial deductive codes were applied to the data, I utilized inductive coding, also called open or topic coding (Saldaña, 2016). Inductive coding is beneficial for reducing research bias, as it fosters the explicit structure of the participants' language and experiences (Douglass & Moustakas, 1985; van Manen, 2016), allowing for concepts and meaning to emerge from the data (Roulston, 2014).

The inductive and deductive coding of descriptive codes consisted of a word or short phrase that summarized the participants' views and expressions. Furthermore, affective coding was applied to capture the participants' previously noted emotions and value-laden language and experiences (Miles et al., 2020; Saldaña, 2016). To capture the participants' verbatim language, I utilized *in vivo* coding, which aided in recording the ontological realities of the participants' meaning attributed to the phenomenon (Saldaña, 2016).

Throughout the first cycle, the codes were organized into a codebook through ATLAS.ti software, wherein I provided a short description or definition of the code. The codebook organized the study, streamlined data analysis, and supported the study's replicability (DeCuir-Gunby et al., 2011; Saldaña, 2016). I then sorted the codes into

categories and subcategories, which fostered connections between concepts and the reconceptualization of ideas (Coffey & Atkinson, 1996; Rubin & Rubin, 2012). As noted in this study, the process of grouping categories also coincides with the initial step toward generating themes in TA (Braun & Clarke, 2006), which is further built upon through the second coding cycle.

Saldaña (2021) noted that the second cycle is not a second coding tier, but another phase of the iterative process. In the second cycle, I organized and condensed the codes generated through the first cycle of coding to bundle like and similar codes. I then synthesized the consolidated codes into emerging meaningful themes and sub-themes that reflected the participants' experiences of the phenomenon (Saldaña, 2021). This concept of "thematizing meanings" (Holloway & Todres, 2003, p. 347) is a prolific and generally agreed-upon step in qualitative research. van Manen (2016) noted that the determination of themes is an exploration of the philosophical and methodological characteristics of the data. Rather than a rigid process, it was one of "seeing meaning" (van Manen, 2016, p.78). Therefore, I practiced reflexivity, an important aspect of understanding the essential meaning of the phenomenon of study throughout the data analysis process (van Manen, 2016).

In the role of the researcher, my experiences are "embedded and essential to the interpretive process" (Laverty, 2003, p.8) and, therefore, are also an important part of data analysis. Given the instrumental role I played as the researcher, I recognized that the coding and applications of themes relied upon my judgment (Sipe, 2004), and therefore, throughout the coding and data analysis process, I worked to outline my positions through reflexive memoing (see Appendix I).

Letter-writing Exercise

Following the one-on-one interviews, I emailed the participants the four outlined prompts found in Appendix H to solicit their responses to a letter-writing protocol (van Manen, 2016). Participants were given the option of responding through a typed letter or an audio-recorded oral narration of their response to the letter-writing prompts (van Manen, 2003). Microsoft Word or Google Docs was the digital platform used to transcribe the letters. Participants were asked to complete the letter-writing exercise within ten days following the interview. Each participant typed their letter and submitted it through my secure email or a secure Google Drive link. The electronic return of the letter aided in the security of the data, removing the need for transcription, and the nature of the word processing software negated potential errors in transcription.

The guided letter-writing exercise allows the participant to reflect on her experiences through her written or orally narrated word (Elliot, 1997; Harvey, 2011). Each participant will be asked to compose a letter of advice that could be given to a newly pregnant mother in a faculty role in academia. Through this letter, the participant will be invited to share her thoughts, perspective, and hopes for the mother's maternal and academic transition into motherhood. Additionally, retelling one's story can trigger additional details that may not have been recalled the first time (Campbell et al., 2011). This form of reflection and expression of consciousness (van Manen, 2016) allows the participant to ponder their lived experience further and gain a sense of value as they are solicited to provide advice and guidance that could impact the wellbeing of other women in the academy. Their written word may also benefit academic institutions by providing insight into the experiences of perinatal women in academia.

To ground myself in the data, I also engaged in the letter writing exercise prior to the interview portion of data collection (see Appendix J). My personal writing followed the

recommendations of van Manen (2003) and Ayala (2008) as I described my lived experiences while working in the roles of a teaching assistant and an online adjunct instructor of psychology thrice over during the perinatal period. Rather than abstractly defining my experiences, I succinctly detailed my experiences, including my feelings and emotions, while focusing on aspects that stood out for their intensity (Fuster Guillen, 2019). The practice of the writing exercise assisted me in gaining a more concrete sense of what was sought in both the interview and letter-writing exercise and provided me with reflection upon my predetermined ideas of the phenomenon (Stutey et al., 2020). The letter writing prompts found in Appendix H are below.

Letter Writing Prompts

Participants were asked to provide at least one paragraph in response to each of the following prompts.

- 1. What do you wish you knew while pregnant and in the first year postpartum that would have bettered your experiences as an academic and mother? CRQ, SRQ1, 2, & 3
- 2. What guidance and suggestions do you have for the journey of becoming a mother in academia? SRQ2
- Based on your experiences, offer advice regarding support systems during the perinatal period. SRQ3
- 4. In closing, offer any words of guidance, encouragement, and even grit for the transition of becoming a mother in academia. CRQ

Letter-Writing Data Analysis Plan

As participants submitted their letters, I uploaded them into ATLAS.ti for data management. I carefully read each letter to immerse myself in the experiences of each participant. The letters were the final component of data collection, for which I initially drew

upon the codes created from the questionnaires and interviews while noting any new inductive, affective, and in vivo codes developed from the data. I then followed the coding and thematic process discussed in the interview data analysis section. The letter-writing data provide yet another opportunity to reach data saturation and facilitated the triangulation process to ensure trustworthiness and fulfillment of the phenomenon's meaning (Bollnow, 1982).

Data Synthesis

Triangulation was achieved through the collection of the three data sources (Patton, 1999), which provided a test for the validity of the data and the convergence of information from varied sources (Carter et al., 2014; Jackson, 2018). Triangulation aimed to illuminate different angles of "empirical reality" (Patton, 1999, p. 1192). Rather than looking to achieve the same result from every data source, triangulation surfaces variances among the data that foster additional inquiry into the study's phenomenon (Patton, 1999). It was from the data analysis of the aforementioned data sources that the essential themes were derived, which is the final step of analysis that gives way to mining the meaning of the phenomenon's essence and gaining "control and order" to the act of writing (van Manen, 2016, p. 79). It is the action of writing that constitutes the formation of the research process (van Manen, 2016). Through concepts from van Manen's (2016) work, care was taken to decipher between incidental and essential themes. Essential themes enlivened and enriched the essential qualities to make the phenomenon what it was, whereas incidental themes were related to the phenomenon. A tool van Manen (2016) proposed for deciphering essential themes is free imaginative variation wherein I gathered the essential themes of the phenomenon and, one by one, asked myself if the phenomenon still holds the foundational meaning if the theme was to be removed.

Given my shared experiences of the phenomenon, my deciphering of themes was rooted in an emic perspective (Rossman & Rallis, 2017; Rowe, 2014), and therefore, I intentionally reflected upon my predetermined ideas of the phenomenon as discussed in my protocol writing, which aided me in bridling my experiences (Stutey et al., 2020). Bridling draws upon Husserl's (2012) original formation of bracketing, one in which the researcher shifts their attitude from the natural to the phenomenological (Stutey et al., 2020; Suddick et al., 2020). This is an adoption of a hermeneutic consciousness, not an extraction of the researcher from the study, nor is it a position of "neutrality," but a self-awareness "so that the text can present itself in all its otherness and thus assert its own truth against one's own fore-meanings" (Gadamer, 2004, p. 271). Bridling is, therefore, a process that "fosters dwelling, listening, gathering meaning, and maintaining openness to the mystery of being human" (Stutey et al., 2020, p. 146). Bridling encourages researcher reflexivity and aids in more clearly connecting me to my relationship with the phenomenon (Vagle, 2009) and, thus, the essential themes that make the phenomenon what it is.

Finally, member checks occurred by emailing each participant the essential themes found in Table 2 to verify that they reflect the meaning of the experience and that an accurate depiction of the phenomenon was represented (Bradley-Levine, 2015; Creswell & Poth, 2018; Lincoln & Guba, 1985; van Manen, 2016). Participants were given ten days to respond to the email, after which their passive acknowledgment was accepted as their approval of the study's thematic findings. Nine participants responded affirming the themes, and after the tenth day, passive acknowledgment from the final participant was accepted. This member-checking step further solidified the data's trustworthiness (Birt et al., 2016; Lincoln & Guba, 1985).

Trustworthiness

Trustworthiness is both an aim and a practice (Morgan & Ravitch, 2018). A study's trustworthiness is the umbrella that encompasses the procedures used to demonstrate its quality, rigor, and integrity (Morgan & Ravitch, 2018). Lincoln and Guba's (1985) criteria of credibility, transferability, dependability, and confirmability were used to establish the trustworthiness of this study. The following sections expound upon these procedures, which, in many ways, are synonymous with the quantitative terms of internal and external validity, reliability, and objectivity, yet each has distinct implications for the quality and rigor of this phenomenological study (Nowell et al., 2017; Schwandt et al., 2007).

Credibility

Credibility is the internal validity equivalent of quantitative research (Schwandt et al., 2007). Credibility seeks to demonstrate the accuracy to which the study's findings describe reality in the eyes of the participants (Lincoln & Guba, 1985). Specific techniques were employed to establish credibility, including triangulation, peer debriefing, and member-checking (Cohen & Crabtree, 2008; Patton, 2015).

Triangulation

Triangulation involves using three separate data sources (Patton, 1999) to test the data's validity as the information converges from varied sources (Carter et al., 2014; Jackson, 2018). Triangulation occurred through the data collection methods of participant questionnaires, individual semi-structured interviews, and a letter-writing exercise. Through triangulation, the essential themes were identified, and the meaning of the phenomenon's narrative, as told through the participants' lived experiences, took shape (Marshall & Rossman, 2015; van Manen, 2016). While triangulation highlights converging points among the data sources (Carter et al., 2014), the

goal was not to manipulate or conform the data to a whole, therefore, outliers were noted in Chapter Four (McPherson & Thorne, 2006). These outliers provide opportunities for future research of emerging themes. Therefore, the continual data analysis and writing process included a hermeneutic dialogue with the participants to foster the credibility of the themes and narrative through member-checking (van Manen, 2016), wherein the participants reviewed the partial in light of the whole.

Member-checking

During the data collection and analysis process, member-checking enabled participants to give input to the recording and interpretation of their experiences. Each participant was emailed a copy of their transcription to verify the accuracy of their voice. The essential themes were also shared with the participants through email to ensure the culmination of the phenomenon's meaning was reached and the essence of the phenomenon was accurately portrayed (Birt et al., 2016; Bollnow, 1982; Harvey, 2015; Lincoln & Guba, 1985; van Manen, 2016). All participants approved the member-checking efforts listed above.

Peer Debriefing

The technique of peer debriefing was employed, in which the researcher shares their findings and emerging themes with fellow academic colleagues and dissertation committee members who share the lived experience. When available, experts in the field were solicited to increase the trustworthiness of the research (Lincoln & Guba, 1985). The expertise of these individuals aid in validating the application of the literature to the narrative of the phenomenon and implementation of the research procedures (Marshall & Rossman, 2015).

Transferability

Transferability was established by demonstrating how the study's findings may apply to other contexts (Lincoln & Guba, 1985). While external validity, achieved through generalizability, seeks to draw a conclusion by applying the study's findings to a specific population, transferability demonstrates how the study's findings may be applied to other contexts (Lincoln & Guba, 1985). Though the study cannot assure transferability, the conditions required for such were sought through my provision of thick, deep, and rich descriptions of the study's context, the participants' background and experiences, and procedures used in this study (Guba & Lincoln, 1982). As much as possible, this study pursued maximum variation by purposefully including women from diverse academic institutions, disciplines, faculty positions including tenure tracked and career track, and women from varied ethnicities.

Dependability

Through dependability, which is consistent with reliability, the study demonstrated how the findings are consistent and could be repeated (Lincoln & Guba, 1985). To demonstrate the dependability of the research, the trustworthiness criteria was utilized in conjunction with an inquiry audit of the research processes conducted by a qualitative methodologist. Auditing the data and narrative leads to the confirmability of the research (Schwandt et al., 2007).

Confirmability

Confirmability is the extent to which the study's findings demonstrate neutrality or objectivity. It is the shaping of the research by the participant rather than the researcher's bias, motivation, or self-interest (Guba, 1981; Lincoln & Guba, 1985). The steps that were taken to establish confirmability include (a) audit trails, (b) triangulation, and (c) researcher reflexivity (Lincoln & Guba, 1985). In the hermeneutic phenomenological method, Smith (1999) noted the importance of researcher reflexivity in which the researcher journals their reflections of the

research process to increase the methodological and ethical rigor of the study. These written reflections are important to this method of qualitative study, given the researcher's role as the primary tool of data collection and analysis. Through my reflexivity, I self-reflected upon biases, past experiences, interview encounters, and personal orientations, which could influence the angle from which the interpretation process was approached (Tang, 2002; Weiner-Levey & Popper-Giveon, 2013). Sections of the researcher's journal may be found in Appendix I. This is another step of van Manen's (2016) process of human science wherein the researcher's presuppositions are identified and incorporated into the research process.

Ethical Considerations

Sanjari et al. (2014) endorsed the idea that humans are increasingly becoming the choice instrument for conducting naturalistic research due to numerous socio-emotional and intellectual strengths. However, crucial ethical considerations arise from these strengths, which must be addressed when conducting research, especially when using the human researcher as the instrument and the personal nature of the phenomenologically rich data obtained from human participants (Sanjari et al., 2014). The following ethical procedures were used to address these considerations: IRB approval, informed consent, confidentiality, the mitigation of risks, and data protection. Understanding the relationship between the researcher and the participant was also essential.

The first step in achieving an ethical research study was obtaining IRB approval, ensuring the study upholds the ethical principles of respect for persons, concern for welfare, and justice (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). In seeking to respect all persons, continual effort and work was given to establish entry with participants and build relationships upon trust, balance, and freedom

(Rossman & Rallis, 2017). Mutual trust with the participants was solidified by obtaining informed consent before data collection occurred. Informed consent ensured the participants understood the study's purpose, the voluntary nature of participation, including the right to withdraw at any time, that no undue risk was involved, and the intention of publishing the study to increase future research leading to the betterment of human well-being.

To maintain the participants' confidentiality and privacy, participants were given the opportunity to choose a pseudonym, of which five specified their choice, and I assigned one on behalf of the remaining five participants (Bailey, 2018). Participants were also informed that all data would be stored electronically and would be password protected, to which only I have access. Furthermore, all data will be kept for five years for extended study and then destroyed (APA, 2020). To ensure risk was minimized and potential benefits received (Panicker & Stanley, 2021), upon request, participants were provided with additional resources pertaining to the phenomenon, including resources for mental health professionals should they wish to discuss further any of the experiences they shared during the interview (see Appendix G). Lastly, there was effective management of the relationship between the participant and the researcher by debriefing the participant on the nature of the relationship, furthering respect for the individual.

Summary

Chapter Three served to discuss the hermeneutic phenomenological method chosen to understand the perinatal experiences of women faculty within academia in the United States. The benefits of the hermeneutic phenomenological approach were discussed as the study sought the phenomenon's essence through the participant's retelling of their lived experience, and my interpretation of these experiences as the researcher. The study's central and sub-research

questions were discussed, and a description of the participants and the rationale for the study's site and setting were provided.

This chapter also examined my role as the researcher, explaining the transformative framework and philosophical assumptions that guided the study. My role as the human instrument was explored along with the steps that were taken to ensure the ethical actions of the study as participants were recruited to contribute to the study and engage in data collection. The data collection methods of this study consisted of digital questionnaires, semi-structured one-on-one interviews, and a letter-writing exercise, which fostered the triangulation of the data. The rationale for these data collection methods and the data analysis methods that were utilized were discussed. The chapter concluded with a discussion of the systems put in place to ensure the study's trustworthiness and that the respectful and ethical treatment of the participants was upheld.

CHAPTER FOUR: FINDINGS

Overview

The purpose of this hermeneutic phenomenological study was to examine the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identity. A total of 10 participants were included in this study to examine the meaning the participants ascribed to the lived experiences of their perinatal period, a time encompassing the entirety of their pregnancy through the first year postpartum. This chapter presents the findings of this study, beginning with an overview of the participants' demographics related to the study and a brief depiction of each participant, followed by the results of the data analysis of the questionnaires, semi-structured interviews, and letterwriting exercises completed by each participant. Utilizing the hermeneutic phenomenological methodology, five emerging themes and subthemes were identified to represent the essence of the participants' lived experiences of the phenomenon. This chapter concludes with thematic responses to the study's central research question and sub-research questions, followed by a chapter summary.

Participants

Through participant recruitment efforts, 21 participants completed the study's questionnaire, with 20 participants signing the informed consent. Three of the participants did not meet the study's requirements and were emailed to inform them and thank them for their participation. Seven participants did not respond to multiple attempts to arrange an interview; therefore, 10 met the study's criteria and completed all three data collection methods. Eight of the ten participants responded to the member check. Six participants affirmed their transcript as sent, and two made minor changes, which were applied to their final transcript to ensure the

accuracy and representation of the participants' lived experiences. The quotes utilized throughout this chapter were taken from the participants' questionnaires, individual interviews, and letterwriting exercises.

The participants' demographics are as follows: the average age was 37.2 years of age, 60% were white, 10% were African American, 10% were Hispanic/Latino, and 20% were Non-Hispanic White. As outlined in Chapter Three, all participants taught at a four-year institution during their perinatal period. The demographics of the institution of employment consisted of 60% at a public institution, 30% Private- not for profit, and 10% Private for profit. All participants taught in a residential, hybrid, remote online, or asynchronous environment, with 60% teaching through a combination of these platforms. A brief depiction of each participant is as follows.

Heather

Heather is a 37-year-old white professor at a private, not-for-profit university. Her teaching and research disciplines center around education and mental health, which are maledominated fields within her institution. She began her career in an adjunct position and is currently tenured, serving as the director of her program and a professor in a program that had no prior female faculty. Formal maternity leave was not offered at her institution; therefore, she returned to the office with an initially limited schedule going into her third week postpartum. During the first year postpartum, she taught a full course load, engaged in services outside of her teaching related to her discipline, and held advising and administrative responsibilities.

She chose to pump while working and continued to nurse her child, which was a positive experience. During the early postpartum period, she experienced a brief but intense period of postpartum depression (PPD). In examining her two identities, she has found herself to be "better

at both" because she is able to "balance out my different roles and different pieces of who I am as a woman and a professor." She has had multiple children and stated, "I've worked my entire life towards being a professor and being a teacher, and I believe that was [the] calling on my life... just as valid as being a Mama."

Alice

Alice is a 36-year-old white professor at a public institution. Her teaching and research disciplines center on European literature and cultures, a male-dominated field of study. She utilized the stop-the-clock (STC) policy and is currently on the tenure track. She breastfed, but found that the experience of pumping was time-consuming and generally negative. She took 12 weeks of maternity leave, which was made available through her university. During that time, she recovered from the exhaustion of the perinatal period, and due to family circumstances, she performed modified duties until six months postpartum. During the postpartum period, she also experienced PPD in which she stated, "I still felt vulnerable about my work, even though I wasn't really trying to work" which led to feeling "like I wasn't good enough. I wasn't being productive enough and so I think I was feeling down about that and depressed because I was sleepless, I was struggling."

In regard to a maternal identity in academia, she stated,

I certainly never had any models in front of me of people who were doing it. I don't think I ever was able to formulate a clear conception of what it would look like I had doubts about whether I wanted to be in academia, maybe in part as a result of wanting this identity as a mother and not seeing how that could fit into academia.

However, having a child, and subsequently multiple children, has solidified her academic identity: "I feel really driven to do good work, get tenure, and stay in academia."

Jayla

Jayla is a 36-year-old African American and was a professor at a private for-profit institution during the perinatal period. Her teaching and research disciplines fall within the field of environmental studies. She experienced significant perinatal health risks later in the pregnancy, which led to modified duties during the prenatal period. Though parental leave was not available through her university, she was able to take 12 weeks of leave postpartum. She did not breastfeed or pump, and due to her health, alongside managing her maternal and academic responsibilities, she is no longer in academia. However, she desires to return in the future as she has a passion for teaching. She described the prenatal period as "really stressful, it was really tough managing maternal responsibilities and academic." When considering her experiences on transitioning into motherhood, while her pregnancy brought happiness, she also had "mixed feelings." Though she felt well-supported by her family and her academic department, she also recognizes that holding both maternal and academic identities may not work for every individual.

Alicia

Alicia is a 41-year-old white professor of practice at a public institution. Her teaching and research disciplines center on psychology. She began her career in an adjunct position and currently leads a small team of professors within her department. During the third trimester, significant perinatal health risks led to large amounts of time away from the office; nonetheless, she used this time to streamline the academic process. However, this time coincided with the end of her tenure track, and in following her department's recommendation, she took a career track position due to the uncertainties that lay ahead postpartum.

Through female colleagues' advice, she navigated her university's policies and utilized accumulated vacation time to accommodate five months of parental leave. During this time, she experienced perinatal anxiety (PPA), and though she breastfed for a period, stress impacted her milk supply, and pumping was logistically challenging due to her course schedule. She stated that her mentor was "rightfully concerned for the effects [motherhood] can have on your career." In reflection upon Alicia's maternal and academic identities, she stated, "I'm probably the kind of person that needs both to be my best at either...need some sense of self, and this [academia] is a big part of my sense of self." Yet she viewed motherhood as her primary identity and stated, "This (motherhood) is now my job, and how do I do *this* job well?"

Olivia

Olivia is a 34-year-old white professor at a private not-for-profit institution. She serves as an assistant professor in her teaching and research discipline of physical therapy, a female-dominated field of study. She began her full-time position and found out that she was pregnant; therefore, she did not qualify under the Family Medical Leave Act (FMLA), but she utilized paid time off and short-term disability in order to have 6-weeks of parental leave. She breastfed and generally had a good experience with pumping while at work.

She experienced PPD, which "worked itself out mostly into rage symptoms." She found the most prominent effect of PPD on her academic responsibilities was "kind of slowing me down and decreasing my focus when I felt like I wanted it to be more." Regarding her maternal identity and work-life integration, she notes,

I remember always feeling confident in, like, mothering skills, essentially from conception on, so like that was never an issue. It is more just like organizing multiple people's lives and staying on top of things. Just feeling alone in that for a lot of the time.

Lydia

Lydia is a 39-year-old white professor at a public institution. Her teaching and research disciplines center on Public Health and decision analysis, a female-dominated field of study, although her graduate degrees were obtained in a predominantly male discipline. She utilized the STC policy and is currently a tenured associate professor. Her key responsibilities prenatally uniquely consisted of grant work, affording her more flexibility during the exhausting and physically straining perinatal period. Postpartum, she utilized a combination of FMLA and paid time off to take 11 weeks of leave.

Breastfeeding was challenging, and while she pumped, she notes that in returning to work,

I wasn't sleeping and it was terrible . . . I felt like returning to work...no one is getting a good deal out of this. I'm not getting a good deal. My work is not getting a good deal. My child is not getting a good deal. Like, nobody's getting a good deal...like I'm not doing quality work because half the time I'm pumping, and I can't work.

As a mother to two children, she stated that she can now see that her PPD was primarily due to "sleep deprivation added on top of stress added on top of feeling like you're not good at anything." She notes that "academia is a profession where individual identity can be quite intertwined with the job. Becoming a parent changes that identity."

Ada

Ada is a 41-year-old white professor at a public institution. Her teaching and research disciplines center on Education, a relatively female-dominated field of study. She knew the enormous load required to obtain tenure and how it "fits with the male framework, the grinding framework…" and thus worked toward tenure before having her child, simultaneously receiving

her letter of tenure the day she gave birth. Despite experiencing a time of conflicted identity towards motherhood, she conceived her first child after previously failed In vitro fertilization (IVF) attempts. Her baby was born during the summer, and she deferred six weeks of family leave to earn two-course buyouts during the fall semester; however, she carried a rigorous load in two positions of leadership and administrative responsibilities. Though she tried to breastfeed, formula was ultimately the best option for her child. The weight of an IVF pregnancy, family tensions, and a medically high-needs child put her in a state of survival in which she was mentally in a dark place unlike she had been in before, as she stated that part of motherhood was "traumatic for me." It was her sense of responsibility that kept her going, "a very deep, deep, very guilty sense of responsibility" towards her child as through IVF "I chose again. I made them...very intentional, I pursued them." Throughout the postpartum period of raising a high-needs child, she states regarding the expectations she had for motherhood,

you're making these decisions as a mom to be like, let go of that, let go of that, let go of that, and you have to create meaning out of motherhood and your identity and career, the choices that you made.

Jazmin

Jazmin is a 34-year-old Hispanic/Latino professor at a private, not-for-profit university. Her teaching and research disciplines center around public health, a female-dominated field within her institution. She began her career in an adjunct position and currently holds a full-time teaching position. While she utilized six weeks of leave through the FMLA, formal parental/maternity leave is unavailable at her institution, and due to her birth aligning with the end of the fall semester, only three weeks of spring classes were covered by the FMLA. She continued breastfeeding and pumping at work, and while she felt supported to do so, it took

significant planning, including pumping and storing milk in her vehicle and pumping in a classroom between teaching courses. She did not note any mental health challenges and, in contrast to many participants, had a unique perinatal experience, describing feeling, "like a Princess. I'm pregnant; everyone's looking at me so like sweet; it was more like in that way, really, how I felt as a person while pregnant. It felt wonderful. I felt very confident in myself."

Jazmin's department director supported her and sought to ensure she had "a flawless pregnancy. No stress." Her university also supports its faculty with a graduate assistant, which was unique among the participants in this study. However, concerning leaving her child to return to work and the physical healing and adjustments of a postpartum body, she noted, "I knew it was gonna be hard- Didn't think it was that gonna be *that* hard."

Samantha

Samantha is a 39-year-old white tenure-track assistant professor at a public institution. Her teaching and research disciplines center on occupational therapy, a female-dominated field. She began her career in a clinical setting, moving into an adjunct position until she obtained her current tenure track position while concurrently earning a Ph.D. and becoming pregnant. She did not utilize the STC policy as her chair informed her, "we do not recommend that you pause the clock." Utilizing STC is seen as "excused from teaching and service responsibilities," for which "faculty expect people to be *more* productive when the clock is stopped, and that would not be to my advantage."

Prenatally, Samantha dealt with intense nausea, making it difficult to perform in the same capacity as before, but she continued to work up until her child's birth. During the postpartum period, though she was prepared to experience PPD, she instead experienced PPA. She took 11.5 weeks of FMLA, and when she returned to work, she felt that she was "in a fairly good spot

other than I was so sleep deprived that that made me kind of like on edge, jittery, and emotionally sensitive," but "I kind of had relief going back. So, it was a safer space. I was happy to be back to the grind." Though she tried to breastfeed, she was unable to, and though it made the logistics of returning to work easier, she "felt like a failure as a woman." In regard to her identity, she said that academia gave her

a path that I could just work, work, work, learn, learn, learn, take advantage of all these things and connect with students But then, after my child, like that doesn't work. You can't work, work, work yourself to death. Although that hasn't like, fully changed out of my system. I just can't actually do it. So, I mostly have to reconcile this discrepancy of wanting my career to be number one. But that doesn't make sense for me anymore. I want to prioritize my family, but I don't really know how to do that. I haven't achieved it.

Erin

Erin is a 36-year-old white tenured assistant professor at a public institution. Her teaching and research disciplines center on health science and women's studies, which are gender-neutral fields at her university. After achieving tenure, she planned her pregnancy, during which time she carried a university-wide responsibility that she had to transition out of due to the number of working hours and stress of that position. During pregnancy, her mental health sharply declined, for which she sought out therapy to preemptively address her maternal mental health. She also faced physical complications during the pregnancy.

Following Erin's birth, she Erin took eight weeks' leave, though she continued to work from home during this time. Her postpartum recovery was challenging, making her reentry into work "stressful and emotionally taxing." As she returned to work, there were "a lot of emotions and you know, again kind of conflicting like do I even want this to be my identity anymore- what

is my identity?" She continued to breastfeed and pump while at work, though the logistics of pumping were challenging with her schedule, and "any free time I had was spent pumping or sanitizing pumping parts." In her role as an academic and mother, she notes that she feels "like I'm pouring into everybody else's child. I just feel like I'm getting taken from and I'm not getting that like, oh, this is worth it, with my job." She notes "you can't do it all."

Results

This study examined the phenomenon of the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identities. Through the guiding hermeneutic phenomenological tenet of capturing the lived experiences of a phenomenon (van Manen, 2016) in order to facilitate "the possibility of plausible insights that bring us in more direct contact with the world" (van Manen, 2014, p. 66), as the researcher, I tangibly experienced the heart of van Manen's (2016) methodology as I found myself being brought into more direct and vibrant contact with the participants' lifeworlds through the data collection methods of the questionnaire, semi-structured interview, and letterwriting exercise utilized in this study. The results of this study produced five emerging themes and sub-themes, which are supported through In Vivo quotes and discussion.

Theme Development

Given the immersive nature of hermeneutic phenomenology, I utilized the participants' questionnaires and letter-writing exercises to immerse myself in their experiences as I read and coded their data. I also engaged with the participants' lived experiences through the semi-structured interview as I listened, re-watched, transcribed, and coded our interviews. I also took notes during the transcription process of statements and emotions that stood out from the re-reading of the transcript. I then utilized data analysis methods from DeCuir-Gunby et al. (2011)

and Saldaña (2016) to engage in the first cycle of data analysis through the extrapolation of codes and patterns that were derived from the words, phrases, sentences, and paragraphs of the participants' spoken and written words.

Through the cyclical coding process, I transitioned to the second phase of grouping and reducing codes, which led to thematizing meanings (Holloway & Todres, 2003). The hermeneutic phenomenological process is one of exploration that relies upon the researcher "seeing meaning" (van Manen, 2016, p. 78), and though the nuances of each participant's experiences were different, I continued to look for the commonality of experiences among the participants, which led to identifying the five major themes and subthemes derived from the participants' experiences. The major themes are tabulated below (Table 2) and organized in a semi-chronological order as the participants walked through their lived experiences of the perinatal period regarding their identity while in academia.

 Table 2

 Themes and Subthemes for all Data Sources

Theme	Subthemes
Prenatal Experiences	Excitement
	Pregnancy was burdensome
	Preparation
	Hard to picture motherhood
Postpartum Experiences	Motherhood responsibility
	Physical and psychological health
	Postpartum leave and stressors
Working as an Academic Mother	New challenges
	Work adjustments
	Cannot do it all
	Changing priorities and identity integration
Support during the Perinatal Period	Family and outside support communities
	Academic department support and community

Motherhood as a liability

The devaluing of motherhood Need for an advocate Motherhood changes you

Prenatal Experiences

The prenatal period carried many physical, emotional, and psychological changes for the participants. This period encompassed the beginning of a transition from an individual identity as a woman within academia to a publicly visible shift into motherhood, a dual identity. As Jazmin stated, "I had some expectations. And then, it's been, as I mentioned, harder than I expected." The range of key experiences and tasks related to the participants' lives and academic and maternal identities are discussed below.

Excitement

For nine out of ten participants, pregnancy was met with excitement. Olivia stated, "We were definitely very excited like we were not planning to conceive like that exactly, but essentially, we were open to children." Jayla's reaction toward her pregnancy, "I was really happy." For those who had a planned pregnancy and were established in their careers, their longevity in their career influenced their attitude toward their pregnancy within the academy; as Lydia stated, "I was pregnant, but I was pregnant and feeling very comfortable in these [academic] communities because at that point I'd like *reach* that threshold."

For most participants, the timing of their pregnancy reflected their organized personalities and approach toward their career and academic responsibilities. Regarding the timing of Erin's pregnancy, she stated, "it was a very calculated decision, and I was like really excited about it." Four participants noted that their pregnancy occurred rather quickly after making the decision; for Alice, "It happened right away. So I was a little bit shocked because I was prepared to

struggle with fertility and was kind of prepared for a long road, but it actually happened right off." Knowing the rigors of the academic year, Jazmin stated, "I was like, I need to have my babies in the summer so I can have the summers with them." Yet, Jazmin's concerns about the timing of her pregnancy were met by a supportive boss who was "super excited for me."

For some mothers, the excitement was also mixed with trepidation. Several participants were unsure of their ability to conceive and struggled with infertility for a period of time. Ada, who had several failed IVF attempts, stated, "I went and got the pregnancy test, and then there it was. I just couldn't believe it. I was just like just sobbing ... so I was like, just my nerves were just like, 'Oh my God, this happened.'"

For one of the participants, the news of her pregnancy was challenging, as Samantha stated, "I didn't want to lie. I didn't want to pretend like I was happy because I wasn't." Despite an attempt to have children early in her marriage, they were unable to, and had decided, "Well, we're not meant to be parents." Eight years later, she became pregnant and dealt with the emotions of having chosen in light of her infertility of "going down this career pathway that I knew was very intense and that a baby would hinder my ability to be productive." She noted the social pressure to hide her emotions,

It's not socially acceptable to say ... I'm grieving the loss of what could have been a really productive career, which now, you know, I'm just going to have to balance it with something that I didn't have to before.

Pregnancy was Burdensome

To some degree, all participants expressed physiological changes and challenges during their pregnancy. Seven of the participants specifically recounted the fatigue of pregnancy, "I was very fatigued in early pregnancy which surprised me," stated Lydia. Alice recalled, "The

exhaustion of pregnancy was really hard for me. I needed to sleep constantly, and this didn't work well for my work." These physical ramifications also affected the participants' work productivity, as Samantha noted, "I just wasn't getting as much work done as usual because of the nausea, which I had no idea how disabling nausea can be," as it also impaired her ability to teach, in so much that she was concerned about the students' experiences, feeling that they "just thought I was not good, you know. That I just wasn't doing my responsibilities and they didn't know why" as she had yet to disclose her pregnancy.

Alicia, who had a high-risk pregnancy, had to be monitored during the third trimester three times a week for at least two or more hours a time.

It was a 30-minute drive, so there's three hours of your day. You can't work during it.

You can't do anything. You just have to sit there. It's horrible. I mean, my God, the time loss. It was insane, like it was at least a full work day every week.

However, Alicia was able to use this time to academically strategize ways to prepare her courses and her team of colleagues to enhance and streamline the hybrid educational platforms she was using. For others, the demands of work were so high that for the well-being of their child in-utero they had to request to step back. Erin, who held a key role regarding campus health, stated,

I felt like the responsibilities were competing and making it difficult, and so I had to be my own advocate to like, say hey, I'm pregnant. I need to focus on this, like I can't be working 70 to 80 hours like I feel like, I feel terrible, I'm so tired and I can't.

While she was able to transition away from this role, the transition spanned over four months, half of her pregnancy.

Not only did physiological implications affect participants' health, but the emotional and mental toll was also challenging for participants. For Jayla, "the whole process [pregnancy] was really stressful. It was really tough managing maternal responsibilities and academic, so it was really stressful, and those led to me having preeclampsia." For Heather, while her pregnancy was met with excitement, the emotional weight due to having experienced multiple miscarriages meant that her mindset in the first trimester was "I think my feelings, my emotions were much more focused on is this baby gonna make it than it was planning for a future."

For some, the uncertainty and fear of loss of their pregnancy led to pouring themselves into their work. Ada explained,

I just kept working . . . just so I don't have to think about the pregnancy because the thought of losing it at any point was super painful. So I was like, you know what, I'm just gonna work. I'm not gonna think about pregnancy.

Preparation

The process of participants walking through pregnancy and preparing for motherhood indicatively meant disclosing their pregnancy to their department leadership. This act carried emotion for many, as a personal and private aspect of their life was vulnerably opened to their colleagues, transferring into their workplace and identity. Alicia noted,

I think I was also self-protective and protective of the situation [high-risk pregnancy]...

So, I kept a lot of it to myself when I could. I really only revealed when I had to. The unfortunate thing was I was forced to by its effects on my work, so I had to tell my supervisor fairly early.

Lydia stated, "I think it was a little awkward just cause it's like something about your body."

Ada hid her pregnancy by wearing jackets, "I didn't tell people until I was seven months

pregnant that I was pregnant." When she disclosed, "I noticed that people start excluding me pretty rapidly, you know . . . like oh, you know you can't do this in [2 months after delivery] or you can't do this in the fall."

For many, part of preparing for their child was also the investment of time to care for their unborn baby, themselves, and to prepare for their arrival. For some, this meant birthing preparations, such as Heather, who said,

I think any of us who work full time in academia naturally are good at spinning lots of plates . . . I'm going to navigate all the things I'm gonna go to childbirth classes, and I'm gonna plan for my birth . . . and all the things just made it work.

Alice noted lifestyle shifts associated with pregnancy,

Going from not being pregnant or having kids to being pregnant was kind of a transition. It was like the beginning of many transitions to kind of having to do certain things to take care of yourself of having to do certain things in a certain way that you know where you can't just like work all the time or stay up really late or kind of do whatever you want.

Alicia stated that for her pregnancy, "I just had to do a ton of lifestyle changes."

In addition to personal preparation, all but two participants specifically noted work-related academic preparations that had to occur, including prep for the time that they were on leave. Heather's first day returning to the university was in her second week postpartum; therefore, her course preparation was for her teaching, "I did try to prep a good bit as best I could before [the baby] was born, so I at least had the first half of the semester prepped for those new course preps." Jazmin stated, "I was just planning ahead for spring in my classes...and making sure that fall was good. But then, getting everything done for the next semester so that I wouldn't have to worry about that as much." Many participants, like Jazmin, who stated, "I did

try to do a bunch while I was pregnant. Like, oh, this event, I'll be there," tried to be more present and visible prior to their postpartum leave.

For some, the time spent preparing for leave to ease the transition for their colleagues made it more difficult to prepare themselves for motherhood, as Samantha stated,

I was trying to work ahead and get things ready for work so that it minimize the impact of my maternity leave. So, I just rushed rush, rush, rush spent all my time at work and thought, I'll figure out the baby stuff after I have [the baby].

Nothing was lifted off her plate, but instead, what was communicated was "you need to teach as many credits in the summer as you can so that there's less credits for people to take over in the fall because we go 12 months." In the conversation of preparation, Jayla was the exception in that her leave began prior to delivery due to pregnancy-related complications. She said, "it was really stressful, and at some point, I wasn't even able to make it again [to work]. I had to just had to have a break."

While a component of preparation and maternal confidence is that of visualizing motherhood, for those who were unprepared to become pregnant, had experienced loss, and, in some cases, a challenging pregnancy, visualization of motherhood appeared to occur later in the pregnancy. For some, it would seem that their academic discipline and experiences crossed over and subtly influenced their perceptions and visualization of motherhood. Olivia, whose discipline is in physical therapy, stated,

Before we got pregnant, I did not envision myself as a mother of young children. I had never seen myself as that. OK, well, when I have kids, they will be perfectly well-behaved and just mentally fast-forwarding to the teenage years where they can work independently. Well, but yeah, it's been definitely a shift in my brain with (a little one).

Hard to Picture Motherhood

Naturally, many participants were mentally and emotionally rooted in their academic identity during the prenatal period. Erin chose to be child-free during her Ph.D. work "because I was like there's no way I can balance this, but you know, part of it was seeing my mentors just completely, I mean, there was no work-life balance." Ada echoed this, noting that "having a kid when you're on a tenure clock- that takes guts. That takes tremendous physical effort and mental effort that I did/don't have." She admits that the way she chose motherhood fit "with the male framework, the grinding framework." In a similar manner, from the encouragement of Erin's mentor, tenure was the only goal worth going after, "it's basically tenure or bust, so if you don't get a tenure track, you need to, like, you aren't gonna be successful." Therefore, she prioritized her job "because it was like this is what you need to do and sacrifice everything for it. So, I think it made it hard for me even to conceptualize, could I even have a kid and do this [academia]?

Heather also noticed the disconnect between academia and womanhood during her Ph.D. research. She did not have a female mentor, as she noted, "I mentioned to one of my male professors that it is really discouraging to look around this institution and see there's no women on faculty. And so, there's this implicit message that I'm not allowed there." However, Heather allowed this to motivate her, pairing it "with the model set by my mom of like, if you see something that you feel like the Lord would lead you to do, like, go at it with confidence."

Regarding mentorship and seeing motherhood exemplified in academia, Alice noted that her graduate advisor was much older and had no child. She also had very few female professors, "so I certainly never had any models in front of me of people who were doing it [motherhood in academia]. I don't think I ever was able to formulate a clear conception of what it would look like." When inquired whether the lack of a model was discouraging, Alice responded. "I

probably wouldn't use the term discouraging because . . . I just couldn't formulate a conception of this because I didn't see it. I couldn't even have a conception to be discouraged by."

In contrast, Lydia had colleagues who were a couple of years ahead of her, and though they all had young children, she stated, "I still felt like I didn't see it [motherhood and academia] fully for what it was like, it's almost like you just see little glimpses, and so you don't have the context for like what these things mean." She also stated, "Having a baby, especially for the first time, is hard! Physically, emotionally, financially." These holistic changes that occur during the perinatal period are hard to anticipate. Alice stated, "I wish I had better anticipated the difficulties of pregnancy."

Though every participant was selected from a different university, they all shared that they generally felt supported in their pregnancies by their department; nevertheless, the identity shift when there was a lack of examples, or close mentors were challenging. For Samantha, she felt the weight of telling her mentor, who was "career-focused and not family-focused." Samantha said that her mentor had given her "someone to identify with because that's how I identified when I first got into academia." She knew she would be disappointed as her "views were that family got in the way of a career."

For four participants whose full-time faculty appointments were within two years of their pregnancy, there appeared to be more of a tandem development of the maternal and academic identities. For Jazmin, this was due more to her age, as she was the youngest in her department. Alice's experiences were unique in that her maternal identity led to the development of her academic identity, as she stated, "I had doubts about whether I wanted to be in academia, maybe in part as a result of wanting this identity as a mother and not seeing how that could fit into academia." It was Alice's pregnancy that "kind of changed my identity or gave me something to

identify as that was new." Her pregnancy gave her an identity to invest in, which allowed her a sense of freedom in her wrestling to build an academic identity, an identity of which she was still unsure.

Overall, during the prenatal period, most participants found it challenging to envision motherhood within academia. As Erin stated, "I didn't really have a vision of what it looks like to be a working mom." There is a subtle message within academia: the two roles of mother and academic are incompatible. This message is only strengthened by a lack of academic mentors and models portraying motherhood, making it difficult to conceptualize the identities of both mother and academic.

Postpartum Experiences

The birth and postpartum process, which includes the first year following birth, is a dynamic period of maternal physiological, psychological, and emotional changes and development. Coupled with one's role and responsibilities in academia, this time for many women carried experiences that went beyond the healing process of birth and into a profoundly personal experience, one described by Ada as "being the person who had to keep her composure at all times and manage everything and everyone's needs." In the following section, the experiences of participants' lives and academic and maternal identities are discussed below.

Motherhood Responsibility

The participants' experiences of stepping into motherhood through the birth of their child were all unique, but apart from medically necessary interventions, their births reflected their calculated personalities of either a scheduled delivery or a laid-out birth plan. Lydia described her birth as feeling "like a very vulnerable time" but that "it was a very positive experience, a very empowering experience." These sentiments were echoed by Jazmin, who stated that her

"birth was beautiful." In contrast, Alicia's birth was "very intense and very traumatic." Jayla's experience of having preeclampsia led to a "birth that was not the exact time [the baby] was supposed to be born," and her child went into distress. Alice's birth was fast, making her feel "just sort of in shock afterward."

The sense participants had postpartum of entering motherhood and the new role of provider and caregiver to their child tended to be affected by the birthing process, which is a piece of the more extensive process of matrescence, the transformative psychological and physiological process of a woman becoming a mother. For Erin, she found that,

I had to kind of heal a little mentally about my expectations of what I thought I would have [birth process], and I didn't. And then I felt like because I didn't meet my expectations for birth, I was a failure . . . so I felt like I had to deal with that.

For Lydia, her birth was the opposite, expressing the counter experience of participants wherein their birth led to empowerment as they entered motherhood, "the biggest thing was self-efficacy, that was increased for sure." Through Jazmin's birth, she noted a profound maternal sense and responsibility, "I'm gonna do my best to keep catching you as much as I can for the rest of your life."

Just as participants found responsibility and ownership in their academic jobs, the responsibility each one felt regarding caring for their child was preeminent. For many, it was experienced deeply, in unexpectedly profound ways. For six participants who walked through rather difficult circumstances or illnesses surrounding the perinatal period, it was these circumstances that incited a sense of intense responsibility. Through deep reflection, Heather stated, "I felt like I sensed the weight of having a living child a gift that that I wasn't sure I was going to have."

Jayla's experience through the fetal distress of her child echoed a maternal responsibility as she stated, "I really needed to take very good care of the baby." Alicia noted her sense of protectiveness over her child that has continued throughout her parenting as she stated, "and this [caring for her child] is now my job. And how do I do this job well?" For Ada, within the first 24 hours of birth, she noted an uneasiness in the well-being of her child, stating that their cry is "a very different cry and it's not that I've been around, like crying babies...the way [child's] crying, this feels off to me." It was caring for her child amid challenge that incited a strong sense of maternal responsibility as she stated, "my mothering or my identity or whatever that phenomenon is, whatever is unlocked was very different- not the moment that I had [the baby] but the moment I knew something was wrong."

Regardless of the circumstances, all participants in the early postpartum period discussed their maternal sense of responsibility. For many women like Samantha, early postpartum was "trying to react/respond and do the things that you're supposed to do." Samantha encapsulated this by saying, "Let's focus on the next thing." For her, it was a revolving process of

What do I do next? I need to breastfeed the baby. OK, we're gonna feed the baby . . . OK, you're [healthcare provider] saying I'm producing great, but not enough. All right, so how do I fix that? I power pump (timed interval pumping to increase breastmilk production)?

For each participant, caring for one's baby took precedence, and the balancing of caring for self and child took time to learn and was, for some, very intense on both their physical and emotional health.

Physical and Psychological Health

The physical process of healing was discussed by 70% of the participants. Three participants mentioned long-term health complications that arose from their delivery; for Alicia, this means that "five years later, I'm still dealing with shit that I need specialists for . . . and not once did anybody say take care of yourself." Erin, who experienced physical complications from birth, illness, and mastitis, an infection in the breast, recalled, "I didn't even go out for walks. I wasn't leaving my house. I was just like wrecked within the first six weeks of having [my baby]." Having been in strong physical health, her expectation of physical recovery was unmet. Samantha, though she suffered a second-degree tear, was able to "take time to do those baths [sitz baths]," though she specifically noted, "I had support there to watch my [baby], so I felt like, okay, at least do something right for yourself." For Ada, her maternal responsibility to her child with medical needs meant that "I forget about my stitches from C-section...who cares I'm sore, by [4th day after birth] I was walking around, making phone calls" to find the care she needed for her child.

In addition to the physiological ramifications of birth, sleep deprivation, and physical exhaustion were mentioned by eight out of ten participants. Of the two who did not specifically address this, one did say that her child "had some troubles nursing, was our fussiest baby [and] didn't wanna sleep." Therefore, it is reasonable to assume she also was dealing with sleep deprivation. Lydia noted the worst of the sleep deprivation coincided with a 4-month sleep regression, and when she was to return to work, "I wasn't sleeping, and it was terrible. And so, just like that reality that coincides at the same time [return to work], that was just, like, ridiculous." As Samantha stated, "The sleep deprivation and hormonal fluctuations were intense." Alicia noted, "We had feeding issues, sleeping issues, a few other problems that just all culminated in a high-needs baby." The culmination of exhaustion, hormonal fluctuations, and

stress not only takes a toll physically on a mother, but psychologically as well. Samantha, despite being an introvert, recognized that she "desperately needed support – female support – daily for the first six weeks" as she knew "it was not safe for me or [infant] because I was so anxious and like so sleep deprived that I couldn't think." Samantha had perinatal anxiety (PPA). Alicia also struggled with PPA, which led to her having to be hospitalized during the postpartum period.

Mental health, an essential point of maternal well-being, was discussed in every interview, with seven participants sharing that they walked through either PPD or PPA. One participant shared their mental health struggles that occurred prenatally, and two did not formally mention the topic. Still, both mentioned adjusting to unmet expectations and the stress induced by these challenges. In the discussion of Lydia's PPD, she said, "Postpartum is largely external, right? Because of sleep deprivation, right? Sleep deprivation added on top of stress added on top of feeling like you're not good at anything." Heather noted, "I knew in my head this is hormonal," and while her battle with PPD was short, it was "incredibly deep, meaning like suicidal ideations, hopelessness, despair and in the midst of that thinking, I know better, what are you doing?" For one participant, their mental health suffered well beyond the first year postpartum. Mental health is not a siloed aspect of one's life, and for Olivia, her academic identity intersected with the psychological experience of depression; she stated,

I did have postpartum depression. It worked itself out mostly into rage symptoms, so I did get some therapy for that . . . The main effect of that was just kind of slowing me down and decreasing my focus when I felt like I wanted it to be more, umm, just working ahead on lecture prep and keeping up with everything essentially.

Even while on leave, the participants' work-life and identity were not simply tabled. For Alice, the psychological ramifications of PPD and the postpartum period intersected with her work and developing academic identity, as she stated,

I remember being really depressed. I got depression, and I was really struggling with the baby's sleep. And, you know, I think I still felt vulnerable about my work, even though I wasn't really trying to work, I don't think, at that time. I still felt really unsure about it or like I wasn't good enough. I wasn't being productive enough, and so I think I was feeling down about that and depressed because I was sleepless, and yeah, I was struggling.

Postpartum Leave and Stressors

Only three participants discussed a formal parental leave policy provided by their university, one of whom waived their leave in exchange for course buyouts in the following semester. The remaining participants discussed utilizing time supplied through either the FMLA, accrued sick time off or vacation time, short-term disability, or a combination of these options. For four participants, the timing of their child's birth occurred during the summer, which afforded that period off in conjunction with the above form(s) of leave taken. Alicia was fortunate to have women in her department who could help her strategically utilize close to a decade of accumulated vacation time. Her experiences were unique, as she stated, "I don't have to take sick time to go to the doctor; instead, I just meet with students on Sunday." Therefore, as she stated, she had "all that sick time, all the vacation time, all of it, just sitting there in a bank, but we never take it, right?" For many academics, a unique benefit of employment is adapting one's schedule to a certain degree. For Heather, despite her experiences of needing to return to

work with a reduced schedule going into her third week postpartum, she was also able, albeit to a much lesser degree, adapt her schedule, as she discussed:

I had to get things done, and what I mean by that is I have numerous memories of sitting in my chair at home, nursing, typing over my [baby], and I kind of chuckle at that. But, like, I just had to manage, right? And so, because I couldn't be in the office 40 hours a week or didn't feel like that was appropriate with a newborn, I kind of had to work around like I'm nursing and answering emails at the same time. Uh, it just is what it is.

While Heather did not perceive her work spillover negatively, she also had no choice.

Participants who took at least six weeks of leave mentioned some level of work spillover during their break. For some, it was physical actions such as working on course content.

Samantha recounted that after birth, when her baby went to the hospital nursery,

I got on my laptop and kept building content. I did that throughout my entire maternity leave, just to help those adjuncts out because they weren't getting supported really by anybody else. So, I just cared so much about the student experience.

For other participants, it was answering emails, working on course content, or collaborating with colleagues covering their courses. Jazmin noted in her questionnaire,

I definitely worked during my leave making sure classes were set and my graduate student assistant was ready to teach. I had left a complete manual before my leave, but I still had to do a lot during my leave.

For some, working while on leave helped alleviate some of the future anxiety of returning.

Olivia stated, "it basically was an outlet for whatever the anxiety would have otherwise felt being not prepared for the next couple weeks of classes for the next semester." However, Olivia also acknowledged, "One regret I have is communicating so much (even just via instant

messenger) with some of my coworkers and doing some of the work that I did." For some participants, working was a coping mechanism. Alice stated, "for the postpartum period, I wish I had known that it's okay to work. I thought I shouldn't work—I should be with my baby. But my mental health was better when I did work." In contrast, Erin, who ended up teaching a course while on leave, reflected on that choice, stating, "It's that time, I can't get back, you know... I don't think I would do it again." Even though for Erin, "the newborn stage is not my favorite, it's still so important and I like, need to be fully present for it." Samantha echoed the same observations, stating, "I wish I wouldn't have worked because it's also a once-in-a-lifetime opportunity to have that FMLA and bond with your child." Samantha went on to say, "If I were to have another baby. I would do it completely differently with the second one because I know better."

The theme of one's academic identity intersecting with one's maternal identity resounded among many participants. Heather stated, "I stand in a classroom and talk about postpartum depression," which created internal tension as she contemplated why she had presumed "this wouldn't happen to me." Ada, with a sense of determination but also franticness, recounted her experiences when breastfeeding was not working, "I'm a social scientist, right? So I'm like this many ounces at this time, count 3 hours, You know what I mean? What's the pattern across three days, adjust." Lydia noted her academic identity as

I'm like core science, right? Like science, science, science. But it really it didn't feel right to go back to work that early. It didn't feel right to do sleep training with my child. It didn't feel right to put him in daycare like all these things that I knew, that my colleagues did. And you know, in some ways, they did it out of necessity.

For Samantha, the act of breastfeeding also intersected with her academic identity and competencies, as she stated, "I'm an occupational therapist, so it just felt like there were values tied to doing that occupation, and I couldn't do it" due to a medical issue. It was through great emotion that she stated that the inability to breastfeed cut at who she was and made her feel like "a failure as a woman."

Breastfeeding and pumping, while a deeply personal choice, was also a source of stress for many participants. Eight out of ten participants either breastfed or attempted to. Of these participants, they all addressed the challenges and stress associated with either breastfeeding or pumping. Lydia noted breastfeeding "hurt and it was stressful and hard," while Heather's child "had some troubles nursing," and Jazmin "I had some issues with breastfeeding." For Jazmin, concern for her child's weight gain in light of returning to work, caused stress that meant she was "literally feeding [the baby], pumping, feeding, pumping . . . it was just a little bit crazy" until her healthcare provider was able to ease her concerns. Samantha recalled a nurse commenting, "I've never seen a baby suck so well the first time, like [baby] was a champ. So why wasn't it working? What's wrong with me?" Alicia stated, "I knew my milk was failing, and the pediatrician was getting annoyed with me. The lactation consultants were pissed off at me, and I was like, you guys don't understand." Her maternal intuition, through frustration and panic, led her to say, "This is wrong . . . I'm not listening to anybody anymore . . . then we started feeding her formula., and guess what? My baby slept, and my baby grew." Given the numerous dynamics of breastfeeding and the very personal and maternal nature of the act, the journey is one that is laden with emotions, including both beauty and awe, along with frustration, stress, and discouragement. Regardless of how a mother's infant was nourished, the act of caring for their child's most basic needs stands as a marker of maternal confidence.

In addition to the daily care of one's child during the first year postpartum, all participants had to plan and arrange trusted care for their child when their leave was over. For seven participants, childcare was either done through family members, their spouses, or private care. Alice cared for her child during her 6-month leave, and the remaining two participants utilized the methods listed above until they enrolled their child in a daycare facility at 6 months old.

The arrangement of childcare conveyed deep maternal reflections and, for many participants, even surprise as they had imagined the exchange happening according to society's standards of institutional childcare. Lydia expressed that having come from a country where a mother's maternal leave was a high priority and well-subsidized, the idea of returning to work at 12 weeks was "a ridiculous assertion that that was even possible." She remarked that the idea of one having to take their "child to a center to be looked after with other infants, that was just like, no, I don't even understand that." Lydia stated,

the actuality, the reality of just what a child that age [12 weeks old] looks like and what a postpartum body at that time can be like . . . and I was like, this is when we want people to go to work and daycare.

She further stated that her delivery did not include interventions, and therefore, by twelve weeks postpartum, she "was on the more recovered end then a lot of people." Consequently, she stated, "I wasn't an extreme data point either," noting that she had "a flexible job, and there were days where "I just didn't work because I couldn't do it. I think it just really drove home how ridiculous this idea is."

For Alicia, her spouse had an assumption that daycare would be the choice of care for their child, yet in rebuttal, Alicia stated, "No, this fragile, tiny, early born- [baby] was so small . .

. N.O. . . . there is no way I'm putting [this baby] in a room of 20 babies right now with four caregivers. You have got to be kidding me." Like other participants, Alicia and her husband found a way to keep their child at home. As Lydia expressed about the childcare structure, "there was a little bit of a feeling that the regular supports are insufficient." She stated that you had to have resources, financially or through support systems that are above and beyond to

feel like you could be the mother you wanna be and have a job . . . you have to have the one up, and our one up was the grandparents who were willing to come up for these long periods of time and do childcare.

For Samantha, her lengthy commute to her university made it challenging to decide where to have her child cared for. Still, her husband's job afforded flexibility and, therefore, helped relieve some of the stress of deciding to have her child closer to home, but further from where she was at the university. For Erin, formal childcare before the age of two was unavailable in her area; therefore, "it's almost like faculty have to crowdsource childcare [for young children], which is pretty challenging."

All participants noted the challenge of the postpartum period, as the reality was far different than the majority had anticipated. Samantha notes, "motherhood is hard. It's so hard, way harder than I knew. Even if I didn't work. Motherhood is so hard." As Jazmin stated in her letter-writing exercise regarding the perinatal period, it "is harder than any mom-to-be expects to be and making sure you set those expectations to that level is crucial." Ada, whose child had a neurological developmental disorder, recounted the painful process of dying to what she had envisioned for the postpartum period of motherhood:

I had to really, really learn [baby] and not get lost in these emotions of being a first-time mother and say, you know what, it doesn't matter. It doesn't matter if I can't touch my

baby. It doesn't matter that I am not experiencing these moments that I would have loved to have. It just doesn't matter. What matters is that I'm there for [baby]. I'm providing the best care, and that I'm catching [baby] where they are at.

Working as an Academic Mother

The experiences of returning to academia during the postpartum period as both a mother and an academic brought unique challenges. These challenges held pain points that led to inward reflection, but also led to opportunities for growth as an academic and as a mother. Participants assessed their maternal and academic priorities and responsibilities as they adjusted to and worked through the value of each identity, utilizing support systems while also contemplating what it meant to hold both identities in unison.

New Challenges

As participants returned to work, their initial experiences varied. Olivia had the opportunity to tangibly integrate both her maternal and academic identities upon returning to work, as she shared, "I was very excited to get back. Show [the baby] off to the students because they, the students, they love babies too." Jayla expressed excitement as she openly shared that the postpartum period had been boring at times, and she was ready to be with her students, "I've been lecturing for a while, like for a long time. So, I was already used to it, so being at home for three months without being in the class or seeing my students, I wasn't used to it." For most mothers, returning to work held mixed emotions and was harder than anticipated. For Samantha,

Honestly, it was hard to leave my [baby], though I didn't know that ahead of time. Like I thought it would be fine and I would be happy to go back to work, but then actually bonding with your child and leaving them felt scary. Like my [baby] needs me, and what if something happens and I'm not right there?

Like Samantha, Erin stated, "I found that I had a really hard time going back, it was a lot of tears, especially because [the baby] wasn't taking a bottle, and so it was just really challenging . . . how are we gonna make this work?" Jazmin, who did not discuss anxiety during the postpartum period, stated that "going back, I was anxious and sad," but once she was with her students, she was "very happy, and I would forget for a little."

In addition to the emotional experiences of returning to work, there were physical concerns as well. Erin, who had suffered an injury during birth, stated, "It was three months, and I just was starting to kind of feel like OK, I'm like semi-OK." She was concerned about her ability to "teach for 50 minutes and not like have an issue." In returning to work, Jazmin noted that, "Obviously your body is not gonna go back . . . I was still hurting." Not only were there physical and emotional aspects of returning to work, but there were also logistics that participants had to care for to ensure that all was in place for their child during the time away, which added a new dimension to each participant's workload. Erin stated she "didn't anticipate the running mental list that you have all the time." Heather discussed:

I think, in some ways, my mind was always attuned toward what are [child's] needs and what do I need to anticipate. And so whether I was standing in a classroom or preparing to, like, pack [child's] bag, to go to the nanny. . . trying to navigate some of that.

However, with time, participants expressed that these initial stressors lessened, and the logistics became more natural.

For those who continued to feed their baby breast milk, their maternal role not only psychologically, but also physically, transferred into their academic spaces as they had to navigate pumping while at the office. Heather recalls that this was another aspect of "all the little things that we don't think about, planning at, I had to contend with now," such as the logistics of

"having access to a refrigerator . . . where is that milk gonna go, and is it concealed?" Heather also had to schedule meetings with gaps in order to pump, which for nursing mothers, needs to happen at regular intervals, as Erin recounted, "every two or three hours, but you don't really conceptualize what that looks like until you're doing it." For Jazmin, she had to pump in a classroom between lectures as there was no time in between to return to her office location. For Alicia, she commented that "the pumping schedule was not sustainable because my courses are usually 3 hours." Lydia stated in her questionnaire that while she tried to work while pumping, "I would get less output, so I had to take a break. It felt very inefficient, and I really just wanted to be breastfeeding my [baby]."

Erin recounted, "Breastfeeding was a big challenge. Just the pumping and then even people being like kind of just giving me the eye when I'm like trying to sanitize my parts," which felt ironic to her given that her department was health sciences. Jazmin wrote in her letter-writing exercise that having "to leave a meeting or workshop at times to pump- it makes me feel irresponsible, but it's a priority for me." For Samantha, she had envisioned this aspect of her academic and maternal identities integrating, as she stated,

I envisioned myself pumping at work. And so, you know, I registered for all the supplies and knew where the room was and scoped it out before I went on maternity leave and kind of had a schedule mapped out. And then breastfeeding didn't work. So that was kind of sad, like who I envisioned I would be going back to work, just it didn't pan out.

For participants, integrating their maternal identity into academic spaces was not without challenges and difficulties. Given the physiological, psychological, and emotional changes and experiences of early motherhood, many participants discussed the necessity, even though it was not always met, for their workload to shift during the postpartum period. While participants still

desired to engage intellectually, there was a noticeable marker that such work needed to be achievable and realistic during the postpartum period. Following a discussion on sleep deprivation, Lydia made the statement: "There was certain kinds of work that I could do and felt fulfilling and felt like a break from, you know, being a mother, but that wasn't so taxing that kind of struck that balance." Lydia expanded on this discussion, stating that giving "thoughtful feedback" on papers was a place where "I could provide value in my perspective. . . . I felt like I could do that because it's like bite size as opposed to like some giant project that I use to do from beginning to finish." This sentiment encapsulates the desire of participants to continue to engage and contribute to intellectual spaces, therefore engaging with one's academic identity, but doing so in a manner feasible during the postpartum period. Given the multiple demands and responsibilities carried by participants during the postpartum period, there was a necessity "to work smarter, harder, and faster," as Erin stated.

Work Adjustments

With the exception of one participant, for whom the university provided a graduate assistant, every participant discussed that they had to work harder and faster and look for space within their day to fill in the margins strategically. This was not surprising given that in the semi-structured interviews, two-thirds of the participants specifically discussed their driven personalities. Additionally, Heather noted, "I think any of us who work full time in academia naturally are good at spinning lots of plates," to which she added, "especially Mamas, like if we're parents of young kids working in academia, like, there is no sense in which we're only doing one thing ever." Jayla wrote that "efficient time management becomes even more critical" after having a child.

For Ada, working efficiently was strategic, but also physically taxing, as she would work between night feedings at "10:30 PM. I took care of a few emails and then 2:00 AM a few emails so that, like in the morning, I'm a bit ahead of the game." Alice noted that working in the margins was a skill that grew and took time to adjust to when she stated, "I think I wasn't very good yet at having so many disruptions in my workday like now, I can handle it. Now I can, you know, work for 10 minutes and be really productive." Erin remarked, "what can I do in 20 minutes? How many emails can I send? Can I work on this grading thing? . . . being a mom, I'm more like, how many things can I get done and how quickly?" Similarly, Samantha wrote, "I had to readjust my expectations and recalibrate my time use to be extremely efficient at work so I could be totally present at home." She noted that even several years out postpartum, "this is still a work in progress, but something to strive for." Heather reiterated needing to recalibrate, and did so by establishing a hierarchy of her academic priorities:

If motherhood were not a piece of this, I would feel more bandwidth to do the maybe lower priority things, whereas now, because motherhood is a big piece of me, I can only take kind of the top tier of importance.

As participants' maternal and academic responsibilities overlapped, their productivity had to increase. However, by the sheer responsibility of being a mother, a shift in workload had to occur. For many, this was a proverbial cutting of the fat wherever they could; for Erin, this equated to decreasing the time spent working on lesson plans, but "in some ways, it's made me a little faster at thinking on my feet, which is not a bad thing; I'm just kind of rolling with it."

Lydia had to restructure her grading to reduce the time strain. In Ada's letter-writing exercise, she encouraged future academic mothers, "Developing the skill to prioritize and managing the time and energy you have to do a good enough job is important in the early years of motherhood

when your children are least self-regulated and unpredictable." Through Jayla's letter, she encouraged academic mothers to not be "too hard on yourself if you can't maintain the same pace as before."

There was a resounding sense that courses must be taught and service has to occur, leaving research as the only area to scale back. Ada, who had been heavily involved in research, notes that it had to look different, "I can't be out in the field because I have to pick up my child." Alice, who had engaged in a niche form of research, plainly stated that with motherhood, "I can't do that kind of research, right? So just the logistics, the logistics, are a bit harder. You're not as flexible." Erin had to wrestle with envisioning,

How am I gonna still do all these things that I'm supposed to be doing, or I'm asked to do? I definitely felt like that's where it [identities] was very much at odds in that first year, was just trying to figure out, like the struggle and also get used to this, like new way of life.

Alice's limitations on accomplishing the extras of academia led her to "sometimes worry a little bit about like how that looks on my CV [curriculum vitae] and how I compare to people who have a lot more flexibility." For Erin, "I'm not publishing like I just don't have time. I don't have time to sit and write. I don't have time to sit and think." This was also challenging for some as research is an esteemed arena of academia, and Samantha, who was working on the tenure clock, stated, "I'm just going to have to hope it is enough."

Despite the need to restructure priorities, participants held a strong sense of responsibility, though the reality of multiple pressure points was felt. Alicia stated, "I might drop a plastic ball, but that ball will bounce. I will make sure the glass ones do not hit the ground. I don't know how sometimes I get it done, but I usually do."

Cannot Do it All

Seven participants felt internal academic pressure to perform or prove their continued creditability within academia, even though many knew such expectations were unrealistic during the postpartum period. Lydia noted that "sometimes academia, it's like not that I got this message directly, but you need to like give it (your) all, otherwise you're not enough." This internalized message was reiterated by Jazmin, who stated that while she was never made to feel guilty postpartum, "I feel irresponsible at times. And then I'm not; I'm not giving it my all at work." Heather related,

I put the pressure on myself. I can say that confidently, to say I need to be here, and I need to be present, and I need to kind of makeup for when I'm not. . . . and I felt I think maybe more so this need to defend my choices.

Lydia candidly stated, "Have I ever really worked like the way I worked pre-pregnancy? No, I have not . . . sometimes I felt guilty about that, but like, they're [the institution] not providing the support."

The conflict between one's maternal and academic identities, felt internally, was also experienced externally when academic functions overlapped into times reserved for family or in which maternal responsibilities were minimized within academic circles. Ada mentioned the conflict of responsibilities and having to ask, "Let's not schedule this meeting at 4:30, you know, because I have to go pick up my kid from daycare." Heather honestly discussed with her employer the caregiving responsibilities that she gladly accepts but that fall on her, "I arrange childcare. I have to be home. I nurse my children. . . . So, like, that is my priority." However, she noted that other colleagues do not

have to worry about that because his wife is at home with his kids. And that's the prevailing model here. That's neither good nor bad. It just is, and so it's conversations like that to say no; I can't be here before a certain time of the day because I have to arrange for childcare, and I'm the default.

The gender difference was felt by Ada when her male colleagues, "can just say I'm staying late at the office. Like, I don't have that option. There's definitely a gender bias." She noted that maintaining that same output level "takes three times the effort for me" and experiencing an attitude of "if you say you have a kid . . . It's just like it's not an excuse."

Samantha, who believes that "children are a joy and should be celebrated," wrote in her letter, not all adults feel that way, and you do not need to bring unnecessary negative attention to yourself in academic professional circles. This is one of those social norms that I wish were different, but as I always say, react to the reality you are in, not the reality you wish you were in.

Jazmin's situation was unique, as her colleagues advocated for her, "She can't come to that; she has a child." While for some participants this would have been received as sidelining, for Jazmin, it was welcomed. Erin's statement summarizes a prominent feeling: "Society feels like you're supposed to work like you don't have a kid, and you're supposed to mother like you don't have a job. And like it's just, it's not possible, you can't do it all."

Each participant agreed that having it all is not a reality. With a sense of soberness, Ada wrote in her letter, "I hate to think that women need to give up something and that they cannot have it all." She wrote that having it all is only possible "if all the resources are lined up and are perfectly coordinated, but that is not most of us in academia." Lydia reiterated, "There's always this notion of work-life balance, and you can have it all." However, once she had a child, "I don't

know how like how strongly I felt any of that." Her experiences were that "working and motherhood is messed up, even at a, you know, supposedly progressive work environment like a university." Samantha wrote, "Motherhood needs a bit of self-study and assessment of what the mother is ready to give up or accept, and even so, becoming a mother is a shock to your system."

The reality of life shifts due to motherhood also shifted the career goals of every participant. Ada stated in her letter, "Don't have kids during your academic career if you are not ok with your career taking a hit." In relation to Alicia's career, she stated, "I didn't step back from the program until I decided to become a parent, and that's when I moved the program director (her role) to someone else." Olivia recognized, "Motherhood has definitely made me start to rethink one of my, I think, longer-term career goals." The required time away from her family led her toward "backing off and saying, OK, I do wanna put the pieces together to essentially make it easier for the right person to lead." The crucial developmental years of childhood impacted Jazmin's considerations of career advancement when offered a director position, to which she responded, "Maybe in five years, but no, this is not the time." Alicia noted, "It's important to be okay with and ready to pass through many phases (of parenting) and to know your career and other things will one day again get to be a priority, but it may be a while." This means realistically adjusting to the demands of the perinatal period. As Ada wrote,

I hear a soon-to-be mother asking questions about how they can continue their research or publish this paper or go to that conference, I always want to say, "you won't be able to" or "you can but just be ok with your best at the time," which might be mediocre from your or academia's standards.

Samantha remarked, "You can't work, work, work yourself to death." And while she still struggles with this, "I just can't actually do it, so I mostly have to reconcile this discrepancy of wanting my career to be number one."

Seven participants felt the discrepancy between their two identities and the natural inclinations of maternal confidence transferring into their academic sphere as they longed to be present with their child, which was a desire that often did not fit neatly into their current structure of academia. This desire to be present was not only for the significant developmental accomplishments, but also for what may be deemed mundane. While participants knew that continuing to work meant time away from their child, many, such as Olivia, still expressed, "definitely like missing [my child] at times during the days." Even just when her child was "napping at the sitter, it's like, well, I should be at home and having him napping because then I can hear him kind of a thing." Jazmin, who was always "the type of person that I just want to do more" at work, stated that she was "ready to run out of there when my time ends." Ada's "coping strategy is that I tend to compartmentalize things." However, it still did not lessen the grief and regret of missing major milestones, such when she "got a video of [child walking] and I bawled . . . I managed, juggled work, picked [baby] up, took [baby] to therapy. I did all the hard work, you know, but the moment [baby] accomplished, I wasn't there."

Changing Priorities and Identity Integration

To address role conflict, participants had to balance both roles intentionally. Heather noted that each was important and wanted to "hold those two in balance, and I want to hold them well." However, to Alicia, "there's no such thing as work-life balance." Samantha stated. "You know, in academia, you could never get your to-do list done. So, I think that's the hardest part to balance is when do you have boundaries?" Erin felt that her academic and maternal identities

"are at odds," and she has had to "redefine who I am as an academic or try to at least establish a little bit more of a work-life balance because, you know, I feel like my kid deserves more." Heather noted that because academia extends beyond 40 hours a week and interjects into outside hours of life, she's not "spending meaningless time with my kids," but is strategic and intentional with them. Erin confirmed that "juggling work, and in general being a mom, I think there's some growing pains there."

As Alice stated, "I don't think it (balance) was natural," and, therefore, it had to be sought after, with 80% of participants needing to advocate for themselves; as Heather stated, "I've just asserted myself." Of these participants, five expressed that their prior investment into their academic careers aided in their self-advocacy. Lydia wrote, "What is the right balance between my work, which can feel like a child in a way, and my now more demanding family? Do not ask permission to make the decisions that work for you." For Ada, this was the decision to change from responding to emails, "no matter what, within 24 hours," to now drawing a line to guard her weekends. Erin stated, "I've had to be more of an advocate for myself, and I have to be transparent sometimes." Alicia, who had the benefit of being in a smaller department, was transparent about the incompatibility of the timing of her courses and said, "I'd like to move three of these. Here's what I want to do, and (I) was able to be honest about why." Heather stated, "You have to know yourself and care for yourself and set your boundaries." Nonetheless, participants still felt what Erin described as "there's always that push and pull." Erin gave an example of working late and now having to assert herself to say, "I'm gonna come into work late tomorrow... because I was here late last night, and I'd like to see [my child]." Through Ada's letter writing, she encouraged, "Don't shy away from asking for flexibility" (e.g., teaching online courses or joining a meeting online).

Each participant came to a place of identifying that while their two identities could coexist, their academic identity had to shift to make space for their role and identity as a mother.

Olivia stated in her letter: "Becoming a mother will change your priorities in many wonderful
ways." Samantha wrote, "I wish someone would have told me that it is OK to prioritize myself,
my health, and my family above my career, even though I used to do just the opposite in the
beginning of my academic journey." While adjusting priorities differed for each participant, all
experienced a noticeable shift during the perinatal period. Heather remarked, if "the impact of
being at this event is minimal, umm, I'm not gonna be there.- Right? Versus if I was, especially
if I was like a single woman." Jazmin stated that before motherhood, "I made sure, like every
event I was available, I went, I participated, and so now I have to choose...to make sure that I'm
doing my job, but I want to come home to my child." Lydia validated these feelings in her
writing, "It's ok if your priorities and desires change after parenthood. The birth of a child is a
life-altering event!"

These statements all came back to intrinsic points of value, as Erin reflected, "What kind of a mother do I wanna be?" For all participants, their defining of themselves as a mother meant realizing that their child had to come first. Alicia reflected upon this and stated that even when she feels like the responsibilities are incompatible, "I know what the answer is, I'm always gonna pick [child]." Erin, when considering her academic career, soberly stated, "I could leave tomorrow and or I could die tomorrow, and they will literally replace me in a month. So you know, what am I doing?" Samantha wrote, "It took a pandemic and a mandatory stay-at-home order to realize that I was absolutely needed at home but could be replaced at my job. And that was OK!" As Lydia considered her outlook on her career, she stated, "I think maybe as like you're nonwork life grows to include more, which children are part of, then there's even more of

a reason to see there being a lot beyond work." Olivia's outlook on her academic position shifted from where I'm gonna be forever, it's home for me to, OK, it is a job. It has great coworkers. It is a good university, but ultimately . . . it's not so much part of my identity that I can never leave."

With the changing priorities and values of participants, 70% still had a generally positive outlook on their career in academia due to either flexibility, financial stability, or personal fulfillment. Several of these participants had either been in academia for an extended period, held a level of autonomy, or had a supportive department. However, two participants struggled with their outlook on academia due to the demanding work environments they experienced during the postpartum period, and the third participant, Samantha, stated, "I really feel bad about how I lived my life during that postpartum period" as she was simultaneously completing her Ph.D. while also on the tenure track. Alice acknowledged "that academia sucks for a lot of people, for a whole lot of different reasons, but for me, it's been pretty great," though it took time and effort to get to this place where she appreciated "wonderful flexibility that academia gives that is conducive to having kids." While Lydia works in a predominately research-related role, she found "academia is maybe more forgiving in the sense that on a day-to-day basis, you can largely manage your schedule and cancel things if things need to." Heather reiterated that she "can modify it (work) around my family's needs." Looking past the perinatal period, Jazmin anticipated the alignment of her academic schedule to her child's and that "this will be wonderful in a sense like hey, my break is the same as [child's] breaks." For participants who could focus on their "relative success of both" roles, despite the "ups and downs" of academia, they were "empowered to continue in both roles," as stated by Heather.

The evolving shift in one's outlook and execution of one's career was also noticeable in how, for 80% of participants, their maternal identity positively reframed aspects of their academic identity. For many, it was their maternal attributes of caring and responsibility that integrated into their academic roles in meaningful ways. Samantha stated that because of motherhood, "I'm definitely more compassionate and sympathetic to others and give grace left and right. I was given grace left and right. So, I think it's made me ultimately a better person." Ada stated that through motherhood, she chose to "pull back the curtain," and "I tell my students more about the realities of what this (motherhood) is rather than kind of like keeping that quiet and just performing as if I'm always in office." She found that being authentic in this way "comes off even more caring" as it shows students, "yes, I'm here to help you ... in the middle of my personal stuff."

Seven participants noted that motherhood directly influenced how they related to their students. Jazmin stated a shift in how "I see students now, I always cared for them, but I also think of them in a different way, just because you know, I sometimes see, like my baby." She recognized just how fast the years go and that her students were someone's baby. For Lydia, the reward gained from the scholarship has shifted, and "the students really mean a lot to me...for me, it's training people in these methods that I do so that they can go do the work they want to do. That, to me, is much more." Alicia's goal is to "model compassionate leadership for my students, and I do the same for myself in front of them and I think that's a really important for them to see." Half of the women in the study took a similar position of utilizing both their academic and maternal identities to mentor and encourage students.

For many participants, their maternal role fostered the ability to demonstrate for students the multi-dimensional aspects of women in academia. Heather noted that being a mother in an

academic space has allowed her to set an example as women "reach out to me and say I wanna plan a family. I see you do it. How do you do it?" Her stance is that "I wanna encourage them in it, eyes wide open, but encourage them in that." Olivia's cohort students watched her walk through the entire perinatal period, and when they ask questions, "since I had that positive experience overall, I'm able to tell them and encourage them in that direction." A part of the mentoring aspect also involves self-reflection. Alicia, who is passionate about inclusive mentoring, found that motherhood had shown a spotlight on where she had thought, "I was a good teacher to parents, umm before, but I'm not sure that I was." Through her experiences, she recognized that "at least I'm a better professor to my students now." Alice's experience echoes the statements of several participants and Heather's honest remark, "You don't know what you don't know before your first kid."

There was an introspective tone among participants as they reflected upon their personal growth through the process of integrating both of their identities; as Alicia stated, it can "make you a better human, a better academic, while possibly even helping to move humanity forward as well via the ways you will shape your child and the human they will become via your choice to have a child." Heather noted the value that both identities bring to who she is and how she lives, stating, "I've worked my entire life towards being a professor and being a teacher, and I believe that that was God's calling on my life. That was just as valid as being a Mama." She also echoed the common sentiment, "I believe with every bit of me I'm a better Mama . . . I get to balance out my different roles and different pieces of who I am as a woman and a professor." Alice, whose motherhood helped solidify her academic identity, wrote, "I am happiest as a mother when I fit motherhood in alongside work, friends, and self-care, *not* when I try to focus solely on motherhood." Alicia stated, "I'm aware that I'm probably the kind of person that needs both

(academia and motherhood) to be my best at either. Still need some sense of self, and this (academia) is a big part of my sense of self."

Support During the Perinatal Period

Support was a crucial component for the participants during the perinatal period. The theme of support reviews participants' perceptions of the support they received or did not receive from various sources. The relationship and effects of immediate support, such as spousal and family, upon the participants' experiences during the perinatal period, are discussed along with support communities, such as friends and online groups, and are highlighted as ways of finding both maternal and academic support and community. In addition, the intersectionality of the relationships between participants and their academic department, a component of their mesosystem, and the academic institution upon their perinatal experiences within the academy and perceptions of support and effects on academic outlook are examined.

Family and Outside Support Communities

The most influential support systems were derived from the participants' spouse, family, or close friends. These support systems, or the lack thereof, appeared to directly influence participants' perceptions and feelings toward various aspects of the perinatal period. Eighty percent of participants' spouses played a critical support role during the perinatal period. Jayla stated that it was "with the help of my husband, I was also able to make it" through the uncertainties and stress of the prenatal period. Olivia recounts how taking shifts with her husband during the newborn period "worked out perfectly" and that her husband "still is definitely my biggest support." Erin had "a very supportive partner" who "takes on a lot, like he does all the cooking, all the grocery shopping like he does share a lot of that mental load." She

recognized that without his support, "I don't think I would be able to be in this like hustle culture as much as I am right now."

It was also apparent that participants desired their spouse to come alongside, as Erin stated, "navigating with me" during the postpartum period. Ada, who did not experience the spousal support she needed, wrote, "I also think a supportive spouse is key, but I believe your relationship is reconfigured with your spouse when you have kids." Lydia and her husband felt some of the reconfiguration that Ada mentioned, as they both worked at the same institution, and she remarked, "I think motherhood for us felt very bizarre...with me being home for those first eleven weeks and then he had to teach." Lydia recounts, "There was like, this forced kind of gender role that felt very bizarre to both of us" as she, like all participants, stayed home caring for their child while he had to go to work, which she found to be "an unfair expectation that women get saddled with."

The impact of a supportive and present spouse on the participants' well-being was apparent, as was the lack thereof. Two participants felt "abandoned" and left alone on their postpartum journey. Ada noted, "I felt like my husband and I were partners going through IVF. It was really a team effort," but once they conceived, "my pregnancy felt very lonely, you know, in the sense that I don't think my husband understood anything about pregnancy and because I was also coping with my way of coping." Again, the subtheme of expectations resurfaced, as Ada stated:

It is not what I imagined. It's like I have a husband who's struggling to be a father, to be a partner. I have a mom who's not there. I have the job that I have to keep going. . . . I'm just like, I mentally, this is just too much.

For Alice, her husband was "distant and didn't understand really to some extent. So he was maybe not as good a support as he should have been." Their plan to share the caregiving role was "kind of a disaster because it turned out that he couldn't care for the baby, so I ended up doing a lot of baby care until finally, the baby went to daycare."

While all participants desired to be supported in their maternal role, support is not a onesize-fits-all concept, and therefore, those supporting participants needed to be perceptive of their needs and tailor their support to their personality. This concept was illustrated when Alicia felt invalidated by medical professionals regarding her child's care, and her husband's response was "just perpetuating the problem. Like, totally, unintentionally, as helpful as he could be, but still perpetuating the problem." While Samantha's husband "was always like a strong rock" and sought to be supportive about their pregnancy, it felt "kind of invalidating, you know, like I wanted him to say, Yeah, this is scary. I don't know exactly how it's going to go. And, you know, let me hear your fears and concerns." Frequently, there were discrepancies in the support received versus what was needed because it was hard for participants to express or even identify what they needed most. Alicia recognized that she was "extremely good at covering" what she needed and that while her husband "is a very, very involved parent," her "hyper-independence" meant that "if I can't say I need something, it's not like he can always see it." Given participants' drive and sense of responsibility, key characteristics of their academic identity, it was challenging for many participants to articulate their needs, sometimes leading to a lack of support.

For many participants, the support required for the postpartum period was counterintuitive. Samantha was surprised by the type of support she needed, as "an introvert who is fairly private," but as she wrote in her letter, "I initially thought I would not want anyone to

come over to my house or invade my space. The reality was that I desperately needed support – female support – daily for the first six weeks." Samantha noted, "Maybe that's the one strength I had was to advocate for myself and just be honest. I was struggling, and I need someone." It was her extended family that "showed up. I don't know what I would have done without them, honestly. So that got me through." This is why Erin's letter encouraged women to be honest with themselves and that "it's okay to not take advantage of all support systems" but to utilize "the supports that hold *you*."

In addition to spousal support, 90% of participants received support and help from family during the postpartum period. Jayla, without hesitation, stated her support systems were "my husband and my mom." Lydia recounted needing support in the middle of the night, but since her husband had to work the next day, her "mom to come. . . . over at 4:00 in the morning to take the crying baby." When Lydia returned to work, she was supported by her mother and mother-in-law caring for the baby "three months at a time, almost back and forth," which was "obviously a huge support that we had that was unusual. I guess, you know, there was a little bit of a feeling that the regular supports are insufficient, so you almost have to have this like aboveand-beyond." The concept Lydia shared of needing above-and-beyond support was also highlighted by Jazmin, whose "mom stayed the whole semester once I started work" to help and care for her child. Jazmin wrote, "I have been blessed with so much support from my family and husband. I just don't know how people do it otherwise." Olivia discussed not having family in proximity, stating that "coordinating supportive childcare has been a challenge since both sets of parents live a few hours away, so if I could do things over, I would relocate closer to one set or the other."

On a much smaller scale, in addition to family members, 30% of participants noted the support they received from friends outside of academia. Olivia found support from church friends, who were also "able to just kind of network and say OK, like if you need a babysitter back up, call me or something similar." Heather shared that the support and advice of friends were vastly impactful to her transition into motherhood and her dual identities during the postpartum period, stating that she had "women who had already gone through like having littles" and that "they had poured into me some of their wisdom." The support of friends for Heather meant that she could "rely on them and could trust them . . . I never felt isolated at all." It was through friends that Heather was encouraged to embrace both her academic and maternal identities because "all of those people believed in me," and she was encouraged in motherhood: "The kid should fit into our lives. We don't conform our lives to the kid, and that is radically different than I think many people approach motherhood or the default because babies just demand attention, right?"

Lydia encouraged fostering friendships in her letter, "It can be helpful to cultivate friendships with other academic mothers or mothers-to-be at similar stages, though also recognize that the professional and personal impacts of new parenthood can be very different for different people!" Among those who did not specifically reference close or local friendships, 40% mentioned receiving support from online connections. For Samantha, a Facebook community for academic mothers offered her:

a lot of insight because things come up in there about academia and parenting that I didn't know existed. I didn't know what I didn't know. So I think that gave me comfort, but also fear. Like, yeah, everything I'm worried about does come true for all these moms.

This group held space for Samantha to embrace the uncertainty of motherhood, even if it meant shedding light on the hard things she would face during the perinatal period. These virtual spaces provide community and connection for mothers, for Samantha, even influencing her maternal confidence, "I think that helped me become who I am as a mother . . . just seeing parents and how they're raising their kids. I liked that. I aligned with a lot of that." Ada wrote, "The other big support system is social media, the shorts on Instagram about motherhood, Facebook groups for mothers in academia, etc." Alice believed it to be "important for women to have communities; I mean, I think that the Academic Mamas communities on Facebook are ideal," and for Alicia, it is her "favorite and best village; though actual physical community care is rarely possible for us, the advice from other acamamas is literally priceless. Everyone needs something like this, and I wish everyone had it in this society."

Academic Department Support and Community

For the 30% of participants who did not specifically address support from either friends or online communities, all mentioned some level of academic department support during the perinatal period. In total, 90% of participants felt, to some degree, supported by their academic department. For Jazmin, even before conception, her department was incredibly supportive as her mentor stated, "Don't plan; your family's first. Your work is after your family." She noted that the encouragement and support of her department were vital during the prenatal period and helped lessen her stressors, with "so many appointments" and covering office responsibilities, but "they had my back." Erin noted in her questionnaire:

I felt supported by my department. On days I wasn't feeling well, I was able to work from home, and when my pelvis was hurting, they provided alternative seating for my office. My chair supported me requesting to telework for the remainder of the semester (although it was denied by the university).

Lydia's department leadership were also parents, "Luckily, my direct supervisor was a woman. She has three kids. She's wonderful. She gets it." Olivia, who had known her direct supervisor for a decade, stated, "he was extremely supportive throughout the pregnancy, like letting me work remotely as needed." Olivia expanded on the topic of support in her letter, stating that "people behave differently than policies do sometimes. . . . Find someone who is supportive in your department and utilize that support."

Finding support for the intersection of participants' academic and maternal identities was important and helped participants process feelings of self-reproach for not being able to keep the same pace as before motherhood. Jazmin suggested in her letter, "find someone at work you trust to confide when you are having those feelings because you can feel supported in that way." Jayla wrote, "look for opportunities to collaborate with colleagues who understand your situation." This sentiment was seen by Samantha, who stated in her questionnaire that while she delayed sharing her pregnancy with colleagues, she had to share it with her chair, given the implications her health was having on work, yet "he was supportive and told me not to worry." Olivia noted that her academic colleagues helped with providing "psychological empathy." This impact of department support highlights the role of participants' relationships with colleagues during the perinatal period and supportive spaces within academia.

For Olivia, support and community from her colleagues looked like "a couple of my coworkers" who "visited a couple times" to bring a meal and meet the baby, which helped her "to stay connected." Jazmin noted that following her leave, "work relationships have been really hard," given the dynamics of her class schedule and amended office hours. She intentionally

sought opportunities to be with colleagues, wherein they would "park at the same time and walk together to class so that I could have that community." The emotional support provided through the community with colleagues was reiterated by Samantha, who desired to be authentic in the emotional turmoil she was feeling toward her pregnancy, and her colleagues "held space for me to be conflicted."

In the postpartum period, Samantha found community through texting an academic mother who was also on maternity leave "to share experiences, but that was her second child...that helped with my confidence as well, and academic identity." Lydia described her academic community in that "we have great interpersonal relationships and work relationships. So like, these are my people" which helped her re-enter academia after her leave. The importance of supportive relationships between participants and those in their department, especially during the transitionary perinatal period, was vital, and every participant recognized that support is a necessity during the perinatal period. Heather wrote to motivate mothers to remember, "Having others speaking life into you will help you on those days where you feel like either a total failure or a total fraud (or both! Those are the good days, haha!)." In Erin's letter, she encouraged, "You are not going to have it all figured out. So, lean into the uncertainty. It's okay to get help. Pregnancy and postpartum can trigger so much. Therapy can be an incredible tool."

Challenges to Success as a Mother in Academia

Expressed through the participants' questionnaires, interviews, and letter-writing exercises, notable challenges were faced as they navigated integrating their maternal identity into academic spaces. While participants' departments were predominantly positive, institutional

challenges from the top down led to difficulties during the perinatal period. Lydia bluntly stated, "You could have all the most supportive people in the world, and structurally it still sucks."

Participants observed a mentality that the ideal academic is one whose interests are not divided. Erin's mentor told her, "If you don't get a tenure track job, or if your partner doesn't comply with you getting a tenure track job, you should divorce." What was communicated was that her career took precedence, "it's basically tenure or bust." This meant that many participants felt the perinatal period of motherhood was a liability to their academic success.

Motherhood as a Liability

In many ways, participants experienced motherhood in academia as a liability to achieving either the expectation of a successful academic or an attentive mother.

For Erin, the feeling of motherhood as a liability was tangibly represented during her Ph.D. work in which three mothers began alongside her, and "two of them dropped." She stated. "that was, I think, also kind of like indicative" of what she saw as "the fact that there's no support in place" for academic mothers. Not only did women observe a precedence in which the maternal and academic identities were disjointed, but they also experienced a hidden tone that the two identities should not be combined. For Ada, the liability of motherhood in academia felt like "there's just no winning" on either end, "my female colleagues think I'm a horrible mom; I'm overdoing it." Yet her male colleagues viewed her motherhood as though "we had her, oh, now she's dropping the ball left and right. You know what I mean? Like she's almost cost, she can't be a good scholar."

The concept that motherhood is a disadvantage in academia points to a lingering mentality of the historically male ivory tower, a concept noted by 80% of participants. Lydia

openly expressed that motherhood was "another manifestation of the like patriarchal...that's all still real." Though she came from a male-dominated discipline, Lydia stated,

I rarely experienced like egregious sexism, and so certainly, structurally, I knew there were issues, but I think motherhood is, in some ways, still one of the issues that, or our desire for motherhood and the changes that happen and the work it takes and the effort it takes, right?

Ada noted a double-edge expectation within academia when choosing to hold the roles of both mother and academic:

This idea of like, oh, you should spend time with your kid, and if you don't, you were a bad mom. But then, if you don't perform academically, especially from male faculty, then you're a bad academic; it's like, OK.

This mentality resides within the participants' exosystem and macrosystem ecological levels, which are contained within the sphere of context in Bronfenbrenner's (1995, 2005) bioecological model. Lydia stated, "How unnatural our society is set up to be in like a Western society for having young children." Heather noted this sentiment when she stated, "there's this huge push in society that you can't be good at both, and my husband's even said, you know, I think it's incredibly difficult to be a working mommy." Ada drew attention to this in her letter when she wrote, "The system is designed to have women work as if they don't have kids and the society expects you to mother as if you don't have to work." As stated in the previous theme, the participants perceived the current support systems as inadequate to achieve the societal and often institutional expectations of work and motherhood. Ada highlighted this dynamic in her letter: "Given the multiple layers of pressure points, we have to make choices and be at peace

with our choices although we might feel we are judged by everyone, including our female and male colleagues."

The Devaluing of Motherhood

In considering the acceptance of motherhood in academia, six participants drew attention to the topic of human capital and valuing diversity through their interviews and letter-writing exercises. Lydia highlighted that "nobody's redundant in academia, right? Departments are typically not big enough to have redundancy in viewpoints and expertise, and no one is exactly the same;" therefore, being an academic mother, "that's a strength." Some participants felt the need to defend themselves as both an academic and mother, as Ada stated, "out loud in public across different meetings and committees like, hey, I'm still here. I'm still me. You know what I mean is I still have the same experiences. I still have my goals." Rather than the mentality that sees motherhood as a setback from which to come back, the mentality should be, as Erin highlighted:

You were good before. You are good now because you are still you, and you are still a thoughtful person who wants to, you know, think deeply. That's it. Period. Period. I'd really like a university that is just like we value you for you.

Valuing academics for who they are should be the ultimate goal, along with their humanity, which should not be forgotten in the name of human capital and funding. Lydia described what she tells her junior faculty members,

I know you're feeling all this pressure to like publish this and get this in and make all the right decisions and get on the right track. And it's like just on those days when you're just here, you're good. We want you here, and you are good, just as you are.

Alicia's Ph.D. mentor reiterated this message, "reminding me that I didn't have anything to prove. I was already at the table. I didn't have to earn the seat every day." This is the institutional message that participants desired and needed to hear during the perinatal period.

The consideration and value of participants as individuals were, at times, muddled by institutional policies that neglected the human aspect, which, for these participants, was the integration of their maternal and academic identities. For both Samantha and Alicia, this played out in their experiences on the tenure track during motherhood. Alicia's tenure packet was due concurrently with the end of her maternity leave, but with potential birth complications in sight, she was told, "We cannot wait to find out if you'll be able to produce it. And it's, it's just university rules." Alicia recognized, "It wasn't any human's fault, right? The fault is that systems don't adapt to humans." Alicia stated, "I was relieved that they gave me the option because I was terrified of failing at it while I had a brand new baby," but "now I know I would have made it, but I didn't know then, and you can't bank on that."

Ada, who sits on tenure and promotion review committees, notes the implications of historical policies that negate people, as when the committees look at tenure files of faculty who have given birth. There are "these gaps" and "They didn't publish that year, and oh, guess what? They had a kid. Ohh my goodness- Like, the way that the male faculty talks about those cases, that's just not an excuse . . . there's just no compassion whatsoever, no understanding."

The misconception of productivity while on parental leave, which is why Samantha did not stop the clock, was perceived by participants as having gender-biased implications. Such was the example of Lydia's husband who was able to write "a book proposal when he was on leave" with their second child. Alice's husband, who was also employed in academia, was so stressed about continuing to check the boxes for tenure that "he did not take parental leave" and

"basically wouldn't do anything to take care of the baby because he was so stressed about teaching this course really well to get tenure." However, in Olivia's letter, she noted a forward step, one which starts with basic support and consideration:

While academia as a whole hasn't been built by and for mothers, I see individual institutions as trying to change that. I've found that being aware of the *people* trying to support families in academia helps me be more content, even in the midst of an institutional environment that doesn't seem to value infants, young children, or their parents.

The burden of policies over people was also felt when policies were not in place to support participants or when policies seemed to neglect the reality of the individuals for whom the policy was meant to serve. For many participants, a crucial policy that led to stress and challenges during the perinatal period was the lack of or insufficiency of parental leave. Heather wrote in her questionnaire, "Each 'leave' was managed personally (and I went back to work before my husband did)." Before Heather's delivery, she taught 13 credit hours in two months, "so I could have a baby, and so it felt like the burden was on me 100%. Like, I'm not even saying like 90/10 100% to manage." Heather expanded upon her experiences, stating, "The lack of maternity leave policy, I think, is burdensome and substantially burdensome." Jazmin was only able to take six weeks of FMLA. Lydia, who utilized a combination of paid FMLA and vacation time, wrote in her letter,

Sometimes it feels like the systems are designed for failure. For example, why does FMLA cover only 12 weeks of leave when 12 weeks is just before the first but also the most disruptive sleep regression your infant will experience?

Eight participants specifically stated that paid parental leave is a needed resource. Ada expressed the need for "A policy to take time off, please. Without punishing, you know, without reducing salary. That's very important." Alice, who had six months leave stated from experience, "I think that course releases are essential, and leave time." Erin said, "access to paid leave like-100%, full stop."

The need for infrastructure to provide maternity support applies not only to mothers, but extends to their colleagues, who often carry the burden of participants' loads while on leave. Erin stated, "Anytime you try to take maternity leave or parental leave in academia, I think there's always that challenge like you feel like you're leaving people hanging." Oliva noted, "Essentially, everybody's on overload," and yet her load had to be carried by colleagues while she was on leave. Erin expressed a desire not to add more to others' plates, as "it falls a lot on the people who are in the department" and is an unpaid overload. This is why Erin taught a class during her leave, "I feel like the university would never provide an adjunct to fill my plate . . . I just might as well do this and make the best of it."

The lack of infrastructure to support maternity leave generally led participants to feel that the perinatal period and its accompanying physiological, emotional, and psychological experiences were unrecognized within academia. Lydia wrote, "I wish I had known when I was first pregnant/postpartum that the workplace and even parental benefits have not been set up for your success as both a parent and employee." Alicia's experience was "the fact that women are supposed to manage their pregnancies. That's what mine seemed like." In an email between Lydia and two colleagues, the question was raised, "How long does it take to recover from childbirth? And my friend was like, 'I don't know, like 48 hours?" For participants, their

institution taking the initiative to seek to understand their experiences was a resounding desire.

At the most basic level, Heather needed:

Just for the institution to ask the question, what is this like for you and what would be most helpful from us? Like a simple conversation to say, hey, you're pregnant, we're glad, young families! What challenges do you anticipate this presenting for you, and how can we assist with that as is reasonable? Like, I never even had the conversation.

Need for an Advocate

In inquiring into what academic mothers need from their institution, topics of advocacy, community, communication, and support were discussed by all participants. Ninety percent of the participants articulated that support must be initiated in a top-down approach from the institution. Ada observed that within her institution, "we're just kind of suffering in silos, and now talking to each other, maybe in passing to be like ohh yeah, you know like I had that too, I'm grinding, but it's always this, like let's keep it low." Erin also said, "I see a lot of people at this institution kind of grinding it out in weird ways that you shouldn't have to, especially after you like, just have a baby." Ada implored that rather than considering maternal needs as a "soft topic," "it is an academic issue." To Ada, women and mothers in academia "relates to professional development. It is about human capital. It's about the diversity. It's about inclusivity. You know what key concepts that people research about, do policy around, initiate things." While individual department support was appreciated, Erin stated, "It shouldn't be individually on them to provide that; that should be already provided for the institution."

Through participants' experiences, they discussed the importance of clear policies and plans for maternity leave and transitioning back to work. As Alicia noted, their disability resource center "has just recently been expanded to faculty," though they cover pregnancy,

"nobody knew it." As Samantha stated, "I wish I didn't navigate that (perinatal period) by myself as a first-time mom in the academy." While the form of support systems needed varies by individual, the participants encouraged institutions to make clear the support systems provided and to provide them with a point of contact, a mentor or liaison that could assist them in the transitions of the perinatal period within academia; as Samantha stated, "having a mentor, like specifically for the motherhood parenthood piece, not just an academic piece. So the blending of those roles." Alicia reiterated this need for expectant mothers, having noted her circumstances could have turned out differently "if I didn't have mentors that had gone through it themselves at the same university." Alicia suggested, "you almost need like a maternity coach. . . I think they need a mentor." Jazmin suggested that institutions proactively support mothers by providing someone "to just meet with them during pregnancy, meet with a mom beforehand," and explain, "These are some of the things that will happen. This is what we have for you. . . . someone that can meet with you and ease you through the process" would be helpful, as stated by Jazmin. Alice elaborated upon the need for a tangible academic community of support, such as the Facebook academic mothers group, "I think that there could be something like that in real life, especially at really large universities like the one I'm at. But there isn't ... mentoring and working together and having a space to share things." Jayla encouraged such relationships by writing, "Seek mentorship, reach out to other faculty members who are parents. They can offer valuable advice and support based on their own experiences." While Alicia wrote that her university has made strides to help expectant mothers,

they do not specifically provide pregnancy coaches, and after our interview, I think they should! Both via HR for the insurance/medical supports and via the U and a faculty

member . . . You don't know what you don't know, and you need someone to help you figure that out.

In light of the need all participants experienced for perinatal mentorship and advocacy, 60% of participants were motivated to pursue standing in the gap for future academic mothers. The advocacy of mothers serving on committees within Erin's institution prompted the parental leave that "went into effect the [season] when I had my kid." Through Erin's experiences, she is now "more aware of the gaps and the issues where we need to advocate better for moms to be present in academia," and she is "speaking up, and so are other women who are moms on campus." She noted the "very taxing emotional load that a lot of women in academia bear, particularly women of color" and the need to "make sure that people are getting counted accurately for the mentorship that they're doing for that emotional labor." Jazmin took the initiative to make herself available to human resources, stating, "I wanna help work on the culture and the environment of the university with moms because it really, they really need it." Ada has focused her service on maternal issues, having served "on the university committee that reenvisioned our childcare services to faculty, staff, and students. I'm vocal about these things, and I do pursue service opportunities where I can." The integration of participants' maternal identity into their academic identity caused them to re-evaluate the services and support needed in academia, along with the fundamental changes in their identity as both academic and mother.

Motherhood Changes You

While the perinatal period was quantitatively a time of deficit in participants' academic output, which could cause motherhood to be viewed as a detriment to the success of women in academia, the internal change brought through matrescence could be considered a point of success. Samantha wrote, "You will be amazed at what you can accomplish in your personal and

professional life, and you will re-examine what really matters to shift your priorities." Jayla recounted motherhood as a "remarkable journey that will enrich your life in countless ways. While it may present challenges, being a mother and an academic can be incredibly rewarding. " Alice honestly wrote, "You may feel like you miss out on some academic opportunities on account of being a mama. But having a kid and being an academic are both really awesome things. You can do it." In conclusion, Lydia wrote, "Profound experiences change us. Let yourself be changed and celebrate your growing life and your growing family."

Outlier Data and Findings

Findings that were individually unique to participants were noted in the participant profiles. There was a finding of academic sidelining (Husu, 2005), wherein two participants perceived motherhood to affect the opportunities offered for advancement. There was also a discussion of experiencing the mommy track in which assumptions were made of their capabilities in light of their motherhood. While these findings are related to the literature, they were not congruent among participants and, thus, needed additional data saturation to triangulate and warrant the thematizing of these experiences.

Research Question Responses

This study was driven by a central research question, and three sub-research questions. These questions guided the study's aim, through which five themes were derived, each with subsequent sub-themes. In this section, the emerging themes are applied to the study's central and sub-research questions.

Central Research Question

The central research question addressed through each theme was "what are the lived perinatal experiences of women faculty in academia in the United States with respect to the

integration of their academic and maternal identity?" For participants, the perinatal period was a time of considerable emotional, physical, and psychological changes as their maternal identity emerged while maintaining the responsibilities of their academic identity. The reconciliation of their maternal and academic identities brought unforeseen challenges and changes that required a shift in their academic careers during this period, as Erin noted her identities of academic and as a mother were "at odds" and that she had to work to "redefine who I am as an academic." There was a sense of unpreparedness as participants entered the postpartum period and sought to reconcile the responsibilities of motherhood with those of their academic identity. Participants found that the reconciliation of their identities took time and meant reframing their academic identity during this period as they reassessed each role's values and ways to maintain both simultaneously, to which Samantha wrote, "You will be amazed at what you can accomplish in your personal and professional life, and you will re-examine what really matters to shift your priorities."

Sub-Question One

"How do a woman's academic identity and professional pursuits affect her experiences and perceptions of becoming a mother?" The inability of many participants to experience prior mentorship or examples of mothers in academia created challenges in anticipating the transition into motherhood as an academic, evidenced in the first major theme, prenatal experiences, and in the final theme of challenges to success in academia. Alicia summarized this as "I certainly never had any models in front of me of people who were doing it [motherhood in academia]." As noted in the first, second, and third themes, participants wrestled through how an academic identity, which was their priority before motherhood, could fit into the structure of motherhood, as Erin had to work through "How am I gonna still do all these things that I'm supposed to be doing, or

I'm asked to do?" In the postpartum period, as discussed through the third theme, women had to reconcile their two identities as they reevaluated the demands of academia and their ability to meet their previous mentality towards work and scholarship. In the third and fifth theme of challenges to success as a mother in academia, participants worked through the realization that they needed to reassess and redirect their career goals to carry both the responsibilities of academic and mother, as Lydia considered, "I think maybe as like you're nonwork life grows to include more, which children are part of, then there's even more of a reason to see there being a lot beyond work."

Sub-Question Two

"How do the experiences of becoming a mother affect a woman's academic identity and professional pursuits?" For participants, the experience and life change of becoming a mother meant adjusting their academic identity and professional pursuits, as noted in the third theme of working as an academic mother and the fifth theme of challenges to success as a mother in academia. The way participants approached and executed their work shifted to facilitate their continuation in academia during the perinatal period while not only making space for their child, but also working through a restructuring of the priorities of their identity, as discussed in the third theme. While the necessary adjustments to work and career goals may denote a negative change, for participants, the reframing of their values and dual identities as academic mothers led to growth in how they cared for students and who they are as individuals and educators, which Alicia poignantly summarized the integration of identities as making "you a better human, a better academic, while possibly even helping to move humanity forward."

Sub-Question Three

"What support systems foster the well-being of a woman's transition into becoming a mother within academia?" The role of spouses and family, as discussed in the fourth theme, was instrumental to participants' transition into motherhood, which impacted their transition into academia as mothers. Access to supportive childcare options equipped mothers to transition back to academia; however, without such support, there were logistical barriers to re-entering academia, as discussed in themes two, three, and four. The impact of a supportive department during the prenatal period, as discussed in theme four, was influential in framing a prospective attitude of the friendliness of one's academic department in the postpartum period, as Jazmin stated, "they had my back." The support of colleagues and advice from other academic mothers was beneficial to anticipating and transitioning through the emotional changes and logistical challenges of motherhood in academia. As noted in the fifth theme, flexibility, top-down institutional policies of support and parental leave, and access to a mentor or advocate were critical supports cited by participants to avoid the experiences of "suffering in silos" and instead supporting and fostering the well-being of a woman's transition to the dual identities of academic and mother.

Summary

Participants (N = 10) dynamically experienced the perinatal period as their identity adjusted from that of a singular unit in academia to that of a mother-child dyad who is also an academic. These experiences led to the emergence of five major themes and subsequential subthemes that centered around the experiences of participants. The five major themes are prenatal experiences, postpartum experiences, working as an academic mother, support during the perinatal period, and challenges to success as a mother in academia. A salient theme among participants was the unforeseen changes motherhood had upon their priorities as they integrated

their motherhood into their academic identity. The responsibilities and values tied to motherhood affected how participants approached their academic duties and career goals. A key influence upon the maternal transition and integration of their identities within academia was either supported or hindered by the climate of their department and institution.

CHAPTER FIVE: CONCLUSION

Overview

The purpose of this hermeneutic phenomenological study was to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect their maternal and academic identities and outlook on continuing in the academy. This chapter summarizes the study's thematic findings along with the implications for policy and practice, theoretical and empirical implications, and limitations and delimitations of the study. This chapter concludes with the most significant recommendations from this phenomenological study for further research.

Discussion

Through the data collection methods of questionnaires containing open-ended questions, semi-structured interviews, and letter-writing exercises, the central research questions and three sub-research questions were addressed through five major themes and associated sub-themes. The following section analyzes the study's significant thematic findings. This section is followed by the implications of this research for policies and practice, the application of this study to the theoretical framework and existing literature, and the study's limitations. The chapter concludes with recommendations for future research.

Summary of Thematic Findings

The five major themes of this study are as follows. First, prenatal experiences examined the participants' significant experiences related to academia and their physical, emotional, psychological, and identity transitions during pregnancy. Second, postpartum experiences described participants' birth and the postpartum experience concerning their maternal development, academic identities, and overlapping responsibilities. Third, the theme of working

as an academic mother addressed the challenges of integrating their dual identities within academia and the necessary adjustments to their work and priorities during the postpartum period. Fourth, the theme of support during the perinatal period encapsulated the effects of family and supportive communities, including departmental support, upon participants' well-being and transitioning identities and roles. The fifth theme addressed the challenges participants experienced in their success as mothers in academia, including how motherhood was treated within academia and the support needed for this life-changing period in a mother scholar's life.

Interpretation of Findings

This section provides interpretations of the findings in relation to the study's major themes and associated sub-themes. The participants' experiences are examined in light of the empirical literature presented in Chapter Two, as well as additional research pertaining to the participants' experiences. The theoretical framework of Bronfenbrenner's (2005) and Mercer's (2004) theories are applied to the discussion as this section addresses the study's central research question of what are the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identity?

Prenatal Experiences

As noted in Chapter Two, the existing literature shifted from focusing solely on gender dynamics in academia, to include the examination of roles and identities in academia as the literature explores motherhood within the academy. Currently, limited research is directed at women's perinatal experiences in academia, specifically regarding the development and integration of women's maternal and academic identities. The first major theme found in this study was the prenatal experiences of women faculty in academia, which appears to be limited in

the existing literature. However, the participants' experiences confer with generalized research of women's experiences during pregnancy.

Among the participants, the average age was slightly more than 33 years of age, which confirms the literature's findings that the average childbearing age of postdoctoral scholars lies between 30 and 34 years of age (McConnell et al., 2018; Schoening, 2009). Of these participants, seven experienced prenatal complications; however, the average age of participants was below the expected findings of advanced maternal age and postpartum complications (Falletta et al., 2020; Glick et al., 2021); yet stress during pregnancy can significantly contribute to prenatal and birthing complications (Cardwell, 2013; Zhang et al., 2023).

Within the prenatal experiences, the four subthemes intersect with the first stage of Mercer's (2004) becoming a mother (BAM) theory, which occurs prenatally and encompasses commitment, attachment, and preparation. These prenatal experiences provide expectant mothers with a time of adjustment to the anticipated realities of her new maternal role. When considering the progression of BAM, the initial sub-theme of excitement aligns with the first steps of participants committing themselves to their pregnancy as they begin attaching themselves to the new responsibility of caring for their unborn child, a process which, while met by excitement, was simultaneously burdensome.

The participants' experiences of the prenatal period as burdensome were due, in part, to the physical ramifications of pregnancy, as noted in the literature (Lutterodt et al., 2019; Nazik & Eryilmaz, 2014). Additionally, stress was an aspect that made pregnancy feel burdensome, which Teles et al. (2020) confirm is experienced at a greater level by women in academia than men. For women who were experiencing physical symptoms that impacted their productivity and management of their previous workload, there appeared also to be an increase in their levels of

stress. For 80% of participants, their workload management relied upon their abilities to self-advocate for amended duties, modify their existing duties where possible to match their physical abilities, or simply push through to keep up with their previous academic pace.

For many participants, adjustments to their workload were a necessary means of accomplishing Mercer's (2004) initial stage of BAM, wherein participants were caring for themselves to care for and prepare for their unborn child (Patterson & O'Malley, 2013).

Additionally, disclosure of pregnancy was important to participants' prenatal attachment as they began the process of reconciling their dual identities. Furthermore, disclosure facilitated communication between the participants and their departments regarding what may have been seen as adverse changes in their performance and served to begin the dialogue in preparation for their postpartum leave. While the preparation participants put into their leave could fundamentally be seen as an act of duty and responsibility, it could also be seen as a transference of the aspect of preparation found in BAM to their academic identity. As participants progressed through the prenatal period, there was a consensus that picturing motherhood in academia was hard.

The difficulties in picturing motherhood were traced, in part, to a lack of role models and mentors who were mothers, as noted in the literature (Colbeck & Drago, 2010; Straus et al., 2009). Rockinson-Szapkiw et al. (2017) reiterate the importance of successful mother scholars influentially mentoring women to shape their confidence in combining motherhood and academic work, an important concept in envisioning oneself as a mother scholar. However, there was a consensus among participants that it was hard even to conceptualize motherhood in academia, which hinders the ability of a woman to restructure her sense of self in BAM as an academic (Emmanuel et al., 2011; Mercer, 2004). This indicates a subtle message within

academia: the two roles of mother and academic are incompatible (Mason et al., 2009; Wolf-Wendel & Ward, 2006). While such a stance may not verbally exist at the institutional level, the lack of colleague examples and mentors reiterates this message through practice, as noted by seven participants who stated that they were the only young mothers in their department; therefore, prenatally, they were unable to benefit from mentorship or community among colleagues of the same lived experiences.

Postpartum Experiences

In the United States (U.S.), the significance of the postpartum period has been socially neglected and undermined in the culture. Throughout the world, the significance of the postpartum period is recognized as a time immediately following birth focused upon the care of the mother, who, in turn, is caring for her newborn. Historically, this period in Japan was set aside as a time of recuperation and bonding with the infant during a confinement period of 100 days as the mother was cared for by her parents or family. While this practice has been shortened to 30 days, it continues. India and Latin America also recognize the indispensable time postpartum and provide a 40-day confinement period following birth (Dennis et al., 2007). In contrast to these periods of supported rest and care are the experiences of the participants, further exasperated by a mentality of misinformation even among highly educated colleagues who would assume childbirth recovery for Lydia would take "like 48 hours?" after which an academic mother should be able to reengage in work. Such indicates the culture in the U.S. and is indicative of a misconstruction of the significance of the physiological and psychological components of BAM.

The significance of the birthing process itself is also an essential component of the transition into BAM. While six participants reflected that their birth went smoothly, four

discussed that their birth did not go as anticipated, which left participants experiencing various emotions from shock to failure, which are noted outcomes in the literature (Aktaş & Aydın, 2019; Gibbins & Thomson, 2001). This representation of participants' experiences validates the findings that up to 45% of births are perceived as traumatic, an experience which can have detrimental long-term implications for both the mother and child as well as lead to postpartum adjustment problems (Alcorn et al., 2010; Chiorino et al., 2020). Such maternal adjustment problems may lead to feeling like one is not a good enough mother (Molloy et al., 2021), with such feelings potentially exacerbated by the noted academic and societal expectations placed upon mothers.

Regardless of the birth experience, all participants were ushered into a deeper level of maternal responsibility that began through the sub-theme of preparation and is indicative of the second stage of BAM (Mercer, 2004). The responsibility that participants discussed was felt deeply and personally. While for some participants, calling themselves a mother through developing an attachment with their babies took time, all participants noted deep concern and awareness of their child's needs and actively pursued their child's well-being, at times, to their personal detriment.

All participants experienced either physical or psychological health concerns, many of whom experienced both during the postpartum period. It is common for women to derive their view of this period from societal norms, which is an important component of Bronfenbrenner's (2005) bioecological framework (BM) and BAM, as women, in part, develop an understanding of motherhood through the examples of their society (Mercer, 2004). Given the societal culture within the U.S. of bouncing back from pregnancy to a woman's former way of life and body (Patterson & O'Malley, 2013), participants were shocked by the challenges experienced

postpartum. Their physiological needs were predominately placed as secondary to their child's, a common theme among postpartum women (Barkin & Wisner, 2013). However, theoretically, doing so could be seen as self-sabotaging as the concept of a healthy mother equates to a healthy baby; nevertheless, for participants who did not have adequate support, there were no alternatives, which can have negative repercussions on their health, including their sleep.

The significant sleep deprivation experienced by 80% of participants was primarily due to the encompassing care required of infants during the early postpartum period. Lingering postpartum fatigue, the effects of which can affect women well into 18 months postpartum, was found among 52% of women in a study (n = 119) conducted by Parks et al. (1998), which has noticeable effects on maternal health, as well as infant health. A lack of sleep also reduces cognitive functioning (Khan & Al-Jahdali, 2023). Furthermore, Freitas et al. (2021) found that 61% of professors, 65.0% of whom were female, experience poor sleep quality. The implications of the participants' cumulative experiences of fatigue throughout the perinatal period and potentially prior due to their academic profession should be considered in examining future subthemes related to workload and output, as well as the effects sleep deprivation can have upon one's psychological health.

The experiences of hormonal fluctuations, stress, lack of sleep, and physical recovery are all components that can affect a mother's mental health. Eighty percent of participants experienced either postpartum depression (PPD) or perinatal anxiety (PPA), 70% of which occurred during the postpartum period, and 50% of which were directly stated as PPD by participants. These findings are in line with Falletta et al. (2020), in which 54.9% of mothers working in a university setting reported experiencing symptoms of depression following childbirth. The impact that maternal mental health can have on an academic mother's maternal

self-confidence and adaptation to the psychological restructuring of motherhood (Arante et al., 2020; Epifanio et al., 2015) is significant in considering identity and work-life adjustments during the first year postpartum. However, according to participants, their university did not provide access to mental health services.

It is worth noting the alignment of Raddon's (2002) findings to Samantha's experiences, wherein feelings of uncertainty and a lack of control over one's circumstances during the early months postpartum may preemptively push a mother to seek stability and control through her work environment. Such was the experience of one participant who struggled with maternal confidence and found stability in her academic identity as she worked throughout her leave and felt relief in returning to work, where she felt "secure" and "really confident." While some participants found work to seemingly help their mental health, such could also be a maladaptive way of coping as self-distraction indicates greater severity of PPD that may extend into 32 weeks postpartum (Gutiérrez-Zotes et al., 2016). As noted, experiences shape identity; therefore, the experience of adverse maternal mental health is of prime importance in considering how a woman restructures and integrates her identities as an academic and mother (Burke et al., 2019; Henkel, 2005).

Participants also dealt with stress, which is not uncommon as women transition into motherhood (Gutiérrez-Zotes et al., 2016; Jevitt et al., 2012). Common stressors noted by participants included the combination of holding multiple roles, concern for their infant's well-being, and a lack of sleep (Jevitt et al., 2012). The component of multiple roles was prevalent for mothers as work spilled over into their parental leave, of which only three universities provided a formal parental leave policy, which confirms the findings that only 39% of higher education

institutions in the United States provide biological mothers with paid parental leave (Fuesting & Schmidt, 2021).

While a level of continued academic ownership and responsibility was innate for participants, there was also a consensus that parental leave is a brief and unique period to bond with one's baby, essential in establishing maternal confidence. Therefore, protecting this time by alleviating academic pressure is crucial. In addition, maternal confidence was strengthened through participants' ability to provide tailored care to meet and provide for their baby's unique needs, a level of care that demands significant amounts of physical and emotional output.

One of the tailored ways a mother cares for her baby is through nourishment that meets the needs of both the infant and mother. Among participants who breastfeed, all noted the challenges of this responsibility, which can be exasperated by maternal stress (Nagel et al., 2022). Coincidentally, a mother's perception of support available to her during this time is an important moderator of stress and can positively affect her breastfeeding duration (Isiguzo et al., 2023). Apart from one participant who had to cease breastfeeding for her infant's well-being prematurely, the shortest duration of breastfeeding was 11.5 months, which far exceeds the average. The duration of breastfeeding may be affected by participants' combination of education and maternal age (Laksono et al., 2020; Lanting et al., 2005; Whipps, 2017). Lastly, a significant stressor discussed by participants was establishing childcare for their infant.

The literature highlights the responsibility that lies solely on parents to seek affordable and trustworthy childcare, as only 8% of employers in the U. S. offer childcare assistance (Ranji et al., 2022). For all participants, childcare was handled privately until six months postpartum, when only two participants began utilizing a daycare facility. The implications of this are worth noting as participants favored the support of family and private care for their child. There were

also feelings of anxiety and guilt surrounding childcare facilities, which is consistent with the literature (Fothergill, 2013). The choice in childcare could also be influenced by Hays' (1996) findings on the ideology of intensive mothering in which childcare facilities feel like a poor substitute for a mother's care. Nevertheless, childcare is necessary for working mothers, and logistics, availability, and financial investment are significant considerations in finding trusted care.

Working as an Academic Mother

In returning to work, all participants faced challenges that had previously never been of concern to their academic identity and workload. Among the challenges were navigating how to integrate their maternal identity into their previous and yet evolving academic identity in which they felt angst and uneasiness in leaving their child to return to work. Participants also felt uncertainty in maintaining physical stamina to work, navigating the logistics of pumping, and managing their previous workload during the first year postpartum.

As participants sought to integrate their identities within their academic space, their focus was divided, as the maternal responsibility felt in the previous theme naturally carried into their workspace (Hentges & Pilot, 2021), which, as noted by Mercer (1985), takes time to integrate the dual responsibilities held by participants. Concerns for their child's well-being and their abilities to provide for their child from a distance, along with associated feelings of guilt, had to be worked through and are echoed in the existing literature (Collins, 2021).

Maternal provision for one's child was also experienced through the continuation of providing their infant with breastmilk through pumping, yet the experiences of such within the academic workplace were varied. In conjunction with the literature (Stewart-Glenn, 2008; Wyatt, 2002), nearly all participants expressed that pumping was a hassle, demanding, and decreased

their productivity (Hentges & Pilot, 2021). Nevertheless, they displayed a determination to continue for their child's well-being (Bai et al., 2016; World Health Organization & United Nations Children's Fund, 2019). Furthermore, most participants experienced interpersonal support, including that of co-workers, which has been noted as a key intervention to support the continuation of pumping (Vilar-Compte et al., 2021). However, Erin's experiences were less positive the longer she continued to pump and were similar to the findings of Hentges and Pilot (2021).

In addition to the physical care of one's child intersecting with participants' workspace, there was expressed concern regarding the physiological effects of birth and postpartum, including the taxing aspects of infant care and sleep deprivation, upon their mental and physical health and their abilities to maintain their work responsibilities. These findings nearly carbon copy those of Falletta et al. (2020), wherein a substantial number of participants were struggling with health and emotional needs following their parental leave and re-entry to work. Physical renewal should be an aspect of the second stage of BAM (Mercer, 2004), but such did not seem to resonate with participants and their timing of returning to work. While physical recovery time is affected by numerous factors, extended parental leave may aid in mothers returning to work in a more recovered state, followed by a modified workload (Addati et al., 2022).

Participants consistently reiterated that during the postpartum period, they desired to contribute to and engage in intellectual work, but that during this time, they needed adjustments to their previous workload, which confirms research findings (Bowyer et al., 2022; Declercq et al., 2013; Guarino & Borden, 2017). Though few universities provide modified teaching duties following birth (Hollenshead, 2005), the benefits of adjusting participants' workloads may positively affect their pumping experience (Hentges & Pilot, 2021). Providing a reduced

workload may also aid in the transition and acclimation of the infant and mother to their changing lifestyle (Hentges & Pilot, 2021).

When participants were not supported with a reduced workload by the necessity of their role as the primary caregiver (Derrick et al., 2022), they had to determine a hierarchy of academic priorities and work to increase their productivity in the margins available, which agrees with Cole and Zuckerman's (1987) findings that married women with children are often more efficient, organized, and productive than their childless peers. To achieve this, women often worked outside office hours while simultaneously performing maternal duties (Maranto & Griffin, 2011). Nonetheless, participants also had to reduce their research and publishing, which may adversely affect their career progression or tenure track. While only two participants were on the tenure track at the time of the study, Samantha's experiences reflect that of Schubert-Irastorza and Fabry's (2014) discussion of tenure track burn-out. Furthermore, Ada, who received her letter of tenure on the day she birthed her child, found it to be true that achieving tenure with a child younger than six years of age was harmful to her career (Ginther & Khan, 2009; Schoening, 2009; Wolfinger et al., 2008). The combination of these challenges could exasperate the leaking out of women in the academic pipeline (Cardel et al., 2020). However, the adaptability of participants and their commitment to working within the time available, even working with "three times the effort," as Ada stated, should be considered a strength, and yet also demonstrates the pressure most participants felt postpartum to perform to their previous standards (Bowyer et al., 2022) and those of the male ivory tower of academia.

Nevertheless, the inability to produce at the same level or engage in after-work academic activities (Savigny, 2014) as they had prior to motherhood led participants to feel a level of guilt and self-critique (Ladge et al., 2018), which is not uncommon when dealing with role and

identity changes (Arrowsmith et al., 2016; Fischer & Tangney, 1995). Participants also recognized that they now carried a second shift and could not work themselves constantly (Fothergill & Feltey, 2003; Ward & Wolf-Wendel, 2004). This led participants to soberly contemplate the realities tied to motherhood within academia and how their career expectations had to shift to accept that their time was less flexible than before motherhood, yet this did not decrease their sense of responsibility for their work as they continued to juggle both identities. Nevertheless, there was a consensus that postpartum, both roles cannot be equal and, therefore, they cannot do it all.

The responsibility of motherhood, initiated prenatally, continued to become a significant definer of identity for participants, which led them to advocate for themselves as a mother within academia because they felt their child deserved more than the ideal academic as a mother. Balance and boundaries had to be sought after, as they sought to reconcile the swinging pendulum of the ideal mother and academic, neither of which naturally are reconcilable (Benschop & Brouns, 2003; De Marneffe, 2019). Therefore, participants recognized the necessity of shifting their career goals (Habicht, 2022; Haynes, 2008; Rudd et al., 2008) during the postpartum period, which also led to assessing the value they held to each identity. Apart from one participant, all participants saw motherhood as a profoundly life-changing event that not only permeated their academic identity, but restructured it. Participants, therefore, were not academics who were also mothers, but were mother scholars, which supports Hay's (2014) findings of identity integration wherein work is an identity that is situated within the context of motherhood. Erikson's (1968) developmental theory also demonstrates this evolving identity, which participants experienced as their purpose shifted due to motherhood (Boywer et al., 2022; Burke et al., 2019; Day et al., 2006).

Participants also found that through motherhood, they became better people, which led them to become more compassionate professors who cared more deeply for their students and their successes, which also compelled participants to allow their students to have a view into their lives. The concept of removing the veil opened opportunities for mentoring students (Kaufman, 2021) and setting an example of motherhood for rising female students in academia, which is a concern for the majority of upcoming female academics who care deeply that their aspiring careers can co-exist with a family (Mason et al., 2009). Such mentoring and modeling are essential to the longevity of mothers in academia as participants found their identity as mother scholars to be fulfilling, making them better in each role. This is also a fundamental mark of maternal confidence as the woman welcomes her two identities into a joint space, culminating in the final stage of BAM (Mercer, 2004).

In the final stage of BAM (Mercer, 2004), mothers settle into a new way of caring for their infant and themselves, drawing upon support and reorchestrating relationships into their maternal sense of self. This final stage leads to incorporating one's motherhood into their future goals (Copeland & Harbaugh, 2019; Mercer, 2004; Nelson, 2003). Therefore, participants' views of their career outlook were primarily driven by their maternal identity, as they felt that academia offered a reasonable way of reconciling their maternal responsibilities with their intellectual selves and needs for financial stability. While some participants were less enchanted with their careers and considered other options, the participants in this study were largely optimistic about their abilities to maintain both roles moving forward. However, such optimism could be partly due to 90% of participants having already surpassed the first year postpartum and seeing what academia could look like as their child ages.

Support During the Perinatal Period

The literature has shown that support is crucial throughout the perinatal period and influential in a woman's transition into motherhood (Barkin et al., 2010). Support has been shown to affect a mother's perceptions of BAM, physical and mental health, duration of breastfeeding and pumping, re-entry to the workplace, and positively affect infant health and cognitive development (Ahmadpour et al., 2023; Bogossian, 2007; Cabeza de Baca et al., 2018). Participants noted several forms of significant support, each impacting them in unique and meaningful ways. Of the support systems experienced, spousal support was the most influential and was supported as such by the literature (Emmanuel et al., 2012; Kızılırmak et al., 2021; Negron et al., 2013). However, support must be perceived as supportive to the mother to be most effective (Bogossian, 2007; Kılıç et al., 2024), meaning that support must be tailored to the mother's needs, which may, at times, be unseen or hard to articulate, which is where a supportive partner is crucial. To support the mother in this way, sharing in caregiving tasks, and fostering bonding with the infant, partners must also be provided parental leave (Addati et al., 2022; Cardenas et al., 2021; Persson & Rossin-Slater, 2019).

In addition to spousal support, 90% of participants discussed the critical role of family support during the perinatal period (Ahmadpour et al., 2023; Rajgariah et al., 2021). For participants, their extended family provided emotional and tangible support during the immediate postpartum period and facilitated their return to work by providing childcare for several participants. The rates of childcare provided by family members also confirm the findings of Rose and Elicker (2010) that aside from motherly care for an infant, the preferable choice was care by a relative, though conversely, as maternal education increased, there was a decline in preferring care from a relative, which counters the most prevalent form of childcare by participants in this study; however, assessments for the preference of care was not a facet of this

research. Nonetheless, it is not uncommon for academics to make geographical moves for a faculty position, which may preclude the help of extended family. Such constraints elevate the need to address policies on childcare and further the need for support from other mothers, including friends, social media communities, colleagues, and academic departments (McCarthy et al., 2021).

Social media provided 40% of participants with a digital support system, specifically in groups of academic mothers. The use of these social media sites aligns with Elliott et al. (2022) findings on social media among first-time mothers. The shared human connection and experiences of motherhood and maternal identity through social media positively affected women's transition into BAM (Elliott et al., 2022). The anonymity and constant access to social media provide a promising avenue for continued support for academic mothers.

Among the influences upon a participant's maternal identity integrating into academia, the most significant support was through the participant's academic department, which aligns with the findings that academic identity is a group identity that can be supported through self-identification within one's discipline (Oyserman et al., 2006; Ysseldyk et al., 2019). These findings also confirm that a crucial factor in a woman's ability to successfully balance motherhood and her career is her organization's culture (Torres et al., 2024) Bronfenbrenner (1995) noted this crucial interaction between the person and their context in the Process-Person-Context-Time Model (PCCT) (Cassells & Evans, 2020), in which the interplay of the participants' academic department and their perceptions of themselves and their abilities demonstrates the influence and interaction of the proximal process (Shelton, 2018). This interaction is vital to examine further as a woman's department consistently and personally affects her self-concept as she reorients herself and assesses her value in her transitioning

identity as an academic mother. As noted in Chapters Two and Four, academic departments can either come alongside to support or constrain a woman's restructuring and integration of her roles within the academy.

Challenges to Success as a Mother in Academia

As participants worked to integrate their identities into their academic roles, several challenges were met, many of which participants saw as originating from the top-down by the institution. Foundationally, these challenges stemmed from viewing motherhood negatively, rather than as an asset to the institution, which was conveyed in the sub-themes of motherhood as a liability and devaluing of motherhood. Participants recognized that while progress has been made to diversify gender in the historically male establishment of academia, the life course of motherhood has yet to be integrated into the culture of academia.

Mothers desire to blend their identities, yet the predominant message of academia is that motherhood is a liability to a successful academic career (Colbeck & Drago, 2010; De Marneffe, 2019; Laney et al., 2014; Pearson, 2023). Participants also noted the implicit gender roles of the ideal mother and academic, which are impossible ideals to uphold simultaneously and for which participants felt critiqued if either took precedence (Berger et al., 2022; Raddon, 2002; Ward & Wolf-Wendel, 2021). Rather than conforming to either ideology of the ideal academic or mother, participants wanted the diversity that their motherhood brought to intellectual enterprise and student experience to be more than permitted, but to be seen as a valuable contribution of human capital. Instead, most participants experienced a devaluing of motherhood within academia that stemmed from top-down policies that failed to recognize the enormity of the perinatal period in a mother scholar's life.

At a time in a woman's life wherein she is balancing multiple labor loads, and her selfconcept and identity are evolving and vulnerable, participants needed to know that they were valued and supported by the university; however, participants were hindered by policies that were devoid of the human element of the maternity and postpartum process. These human complexities and life course transitions are important components in achieving a compelling organizational identity in higher education (Bonaccorsi, 2020) that is representative of merit, fairness, and equality (MFE), which are evolving concepts currently represented through diversity, equity, and inclusion (DEI) policies. Women, especially during the perinatal period, are engaged in three forms of labor, the first shift of employment, the second shift of domestic work, and the third shift of emotional labor in processing the guilt created by the first two shifts and working towards investing in relationships with their partner and infant (Hochschild, 1997; Sutherland, 2008). Attempting to hold all three forms of labor within academia is impossible, and given the innate responsibility of the second shift of motherhood, postpartum, participants had to make a personal decision regarding their level of commitment to their first shift of labor because there was a lack of support (Eren, 2022).

The lack of support participants experienced from their institution fundamentally resided in the lack of formal and sufficient parental leave, as stated by participants (n = 8). As previously noted, the postpartum period is a finite period of drastic transitions for which the length of parental leave can have longitudinal effects on the well-being of the mother-child dyad in nearly every domain (Kornfeind & Sipsma, 2018; Van Niel et al., 2020). The lack of such policies communicates in action a lack of support by universities and undermines promoting an environment of MFE that values employees and their families, and moreover, generates a climate of guilt for those who can take leave as in their absence; the burden of their responsibilities often

falls on colleagues. Bearing the burden of one's maternity leave reiterated the need participants expressed for institutional support through a maternal mentor.

Participants desired a mentor who could provide career and institutional guidance through the perinatal period and walk them through perinatal services and policies that may be available by their institution. Participants would have also benefited from an academic community of young mothers from which to gain support and advice, yet participants consistently found a lack of young mothers at their institution. Matthew (2020) reiterated these findings in that only 15.8% of faculty at R1 institutions, known for their research output, are parents of preschool-age children and below, a finding that did not delineate gender.

While some participants attributed existing maternal workplace accommodations to mothers who had gone before them, many expressed a desire to use their experiences to advocate for future mother scholars, which opposes the Matthew effect (Merton, 1968; Teixeira da Silva, 2021). Instead, women desired to remove the veil of their motherhood to promote mentorship and improve the experiences of women academics to come (Memorial's Education Writing Group, 2017; Rose, 2020). Ultimately, reconciling that while the path of being an academic mother is hard, it is an experience that profoundly shapes and changes a person.

Participants did not shy away from admitting that their identity was being reconstructed through the perinatal period of motherhood. While the experience of the perinatal period was, at times, overwhelming, it was these experiences that shaped participants' values and priorities, leading them to be better individuals by being both a mother and a scholar. Rose's findings (2020) reiterate the participants' experiences in that reconciling the identities of mother and academic is fulfilling and should overlap. The alignment of the participants' experiences to that of the literature encourages the cultivation of the mother scholar's identity as their academic

expertise and maternal characteristics of nurturing and empathy can bolster the student experience and lead to a pleasurable and productive identity of mother scholar (Dickson, 2018; Meyers et al., 2019; Raddon, 2002).

Implications for Policy

The study's interpretive framework was the transformative framework, which guided the seeking of participants' experiences to gain knowledge to better the lives of women in academia and progress society (Mertens, 2003). The empirical literature that framed this study, along with the study's findings, raises attention to the experiences of mother scholars during the perinatal period, for which the following discussion will broadly outline suggested policies to address the pressure points experienced by the participants within this study. The following policies are aimed at raising government awareness and promoting agenda-building to address social justice of the perinatal period, the well-being of American families, and the longevity of women in the workforce.

Paid Leave

The issue of parental leave, specifically maternity leave, needs improvement in the U.S. The U.S. remains one of three countries that does not provide mothers with paid leave and is the only nation in the Organization for Economic Co-Operation and Development (OECD) without a national maternity leave requirement (Whitney et al., 2023). Furthermore, since the foundation of the Family Medical Leave Act (FMLA) in 1993, little has changed. Maternity leave is swooped under the umbrella policies provided by FMLA, negating the dynamic transition of motherhood and the impactful short-term and long-term effects of the postpartum period on the mother-child dyad. Given the physiological and psychological challenges of pregnancy, childbirth, and early postpartum, in addition to managing the early childcare responsibilities that predominantly fall

upon the mother, research continues to indicate that even 12 weeks of maternity leave is inadequate to achieve rest and recovery (Dagher et al., 2014; Faletta et al., 2020).

Moreover, the implications of paid maternity leave have long-lasting positive effects on the mother and child, including the economic stability of the mother, child, and academic institution (Avendano et al., 2015; Butikofer et al., 2018; Falletta et al., 2020; Kornfeind & Sipsma, 2018; Van Niel et al., 2020; Whitney et al., 2023). To support the mother and to address systemic gender discrimination that implies the role of caregiving is primarily a woman's work, paternal leave must also be advocated for, as paternal leave can have beneficial effects on the well-being of the mother and child (Persson & Rossin-Slater, 2019). Policies that employ flexibility and joint maternal and paternal leave times should be evaluated. Examples of family-orientated leave policies include Sweden, which provides generous paid leave for mothers, extending leave for multiple births, and flexible paternal leave that facilitates simultaneous leave for both mother and father (Blum et al., 2018). Sweden is just one example of countries with exemplary leave policies that U.S. legislative policymakers and advocates should consider.

Childcare

The prevalence of universal childcare in the developed world, again, places the U.S as an outlier. While universal childcare initiatives are undoubtedly costly, the lack of quality care in the U.S. creates a revenue deficit of \$122 billion that affects families, employers, and taxpayers (Bishop et al., 2023). Affordable quality childcare is a necessity for keeping women in the pipeline, a need recognized as crucial to faculty maintaining teaching research and services responsibilities (American Association of University Professors (AAUP), 1989). Nevertheless, childcare remains a cited challenge for mothers with young children (Hillier, 2021; Novello, 2022).

Participants in this study primarily drew upon family and private resources to provide childcare, albeit none of the participants had access to childcare programs provided through their institution. Initiatives to address Federal and State funding for universal childcare should undoubtedly consider the autonomy of choice in childrearing and care preferences, providing funding for parents to choose the childcare facility or private care option that compliments their preferences and convictions in childcare (Rose & Elicker, 2010). Furthermore, consideration should be given to the longitudinal research on the cumulative effects that pose children at a risk of detrimental emotional development when extensive hours are spent in daycare (Belsky et al., 2007; Belsky et al., 2022; Vandell et al., 2021). Therefore, parents must be provided with opportunities to choose the delegation of childcare funds that best meet their child's and family's needs.

Furthermore, when considering the perinatal period for working mothers, nationwide preschool policies (Lynch, 2021) are of little benefit. The most critical years for a child's brain development, in which social experiences can have critical effects on their neurological and biological system, occur prior to age three (Moore et al., 2015; Pem, 2015). However, government childcare subsidies fail to provide childcare support during this crucial period (Lynch, 2021). For the longevity of the economic contributions of a mother's employment and in consideration of the well-being of the next generation, expansive national policies must address supporting caregiving needs prior to preschool.

Breastfeeding and Maternal Mental Health

Furthermore, expansive policies addressing both maternity leave and early childhood care can work in unison to provide the mother-child dyad with extended time to achieve maternal confidence, establish the continuity of breastfeeding, and protect maternal mental health prior to

entering a quality childcare arrangement upon returning to work (Aitken et al., 2015 Jou et al., 2018; Likhar et al., 2022). Childcare policies and maternity leave must be seen as more than a woman's issue. Instead, these are social justice issues and issues of investments in the development of society (Boling, 2015; Bulanda & Bulanda, 2020). Therefore, women must be given the right to paid maternity leave to establish breastfeeding and policies that render support free from retribution when pumping within the workplace (Stewart-Glenn, 2008). While the Pregnant Workers Fairness Act and PUMP Act are advancements, both acts leave room for discrepancies and subjective interpretations. Furthermore, for mothers who are not salaried, there continues to be a financial burden placed upon those who pump at work as these breaks are unpaid unless individual states mandate such. However, the benefit of lactation programs that enable employees to provide their child with breastmilk (Ortiz et al., 2004) may benefit employers through a reduction in absenteeism, improved employment satisfaction, employee retention, and lower insurance claims (U.S. Department of Health and Human Services, 2008).

Maternal mental health access within the workplace should also be addressed, as the literature has noted the impact of maternal mental health upon every aspect of a woman's ecological system. Furthermore, the exponential cost within the U.S. of failing to treat perinatal mood and anxiety disorders during the first five years following birth has been estimated at \$14 billion (Luca, 2020). Therefore, access to timely mental health services is crucial. Examination of pilot programs for providing access and services throughout the perinatal period should be explored, such as Costa et al.'s (2021) pilot program targeting mental health for working mothers during the perinatal period. Additionally, paternal mental health programs should also be established, and awareness should be raised to support husbands during this crucial time (Cooklin et al., 2015).

Implications for Practice

As noted, the academy is steeped in tradition (Murray, 2008) and slow to adapt to change (Dailey-Hebert & Dennis, 2014); however, as institutions look to recruit and retain women, there must be a transition from viewing motherhood as a restraint, and instead, seeing it as an asset to the culture and intellectual capital of the university. The ideal worker narrative must be altered so that faculty are not cornered into viewing their dominant role in life as their work to the academy (Reverberri et al., 2022; Williams et al., 2016). Given institutions' enormous influence in the transition of mother scholars, the following suggestions are raised for building institutional practices that will foster the growth and success of mothers in academia.

Leadership Development

A fundamental implication for practice is the inclusion of mothers in leadership roles who can advocate for policies that promote maternal well-being during the perinatal. Jansen (2014) equated a lack of female leadership to a lack of investment and sufficient development of women leaders. To promote the continuation of women and mothers in academia and develop leaders to rise in the ladder ranks of influence, two potential implications for practice are sustained mentorship (Jansen, 2014) and strategic sponsorship (Singh & Vanka, 2020).

To help women structure an identity of leadership, strategic mentorship, a tool for investing in an individual on both an emotional and professional level (Singh & Vanka, 2020), must first exist. In conjunction with mentorship, growth opportunities must be provided to equip women for academic leadership positions (Mabokela & Mlambo, 2017). Ruth Ginsburg (as cited in Cary, 2009) infamously stated, "Women belong in all places where decisions are being made. It shouldn't be that women are the exception." Alicia noted in her interview, "You should not have to wear the shoes to be good to those who wear the shoes." However, all the participants

admitted that regarding the perinatal period and integration of their academic and maternal identities, "you just don't know what you don't know." Therefore, it is crucial for women who wear these shoes to have opportunities to be in places where institutional decisions and policies are being made. As noted in the literature, women in academic leadership are predominately without children a decade past their Ph.D. (Mason & Goulden, 2002). This finding solicits the need for sponsorship among female academics, especially those who choose to become mothers.

Mentorship is only sufficient as a preparatory tool for leadership if the mentee is also sponsored, which is the advocacy piece of advancement (Ibarra et al., 2010; Williams et al., 2023). Sponsorship is when an individual holding influence in the decision-making process stands in the gap for another individual to advocate for and promote the advancement of another voraciously (Williams et al., 2023). Each participant in this study conveyed the need for an advocate; however, if women are not mentored and sponsored, such an individual is unlikely to exist. An advocate must hold a position of power wherein their voice of advocacy can be heard. Yet, men predominately serve on committees responsible for curating and implementing institutional policies (Cummins, 2012), policies that affect mothers. When women are not sponsored, women are less likely to be appointed to such positions of influence and are reluctant to seek such opportunities (Williams et al, 2023), meaning that advocacy and potential change are unlikely to happen as the women wearing the shoes are not present where decisions are being made. Therefore, it is recommended that universities evaluate their institutional policies and agendas toward developing leaders and work to cultivate a climate of mentorship and sponsorship. Such efforts may aid in seeking MFE in higher education by addressing the leaking out of women in the pipeline through the pursuit of policies that support mother scholars.

Mentoring Program

The development of mother leaders could also aid in addressing the need participants expressed for mentorship specific to their transitioning role from academic to mother scholar. Maternal support is influential (Barkin et al., 2010), and must also occur within the woman's academic community and from those who share their lived experience. Institutions need to consider ways in which they can mobilize, equip, and facilitate a maternal mentoring program wherein faculty mothers can mentor and provide coaching to expectant faculty mothers. Through the sharing of lived experiences and identities, the institution and its academic community could become an agent of empowerment for mother scholars (O'Reilly, 2010). The existence of such programs may also solicit the retainment of rising female academics as they provide examples of motherhood in academia, which dismantle the narrative that the two roles are incompatible (Mason et al., 2009).

These mentorship programs may also aid women in the first stage of BAM as they help expectant mothers facilitate envisioning motherhood (Mercer, 2004). Maternity mentors would also help women during the prenatal period plan for the postpartum period, a time which participants described as harder than they had imagined. Prenatal preparation correlates with a greater adaptation to the postpartum role and satisfaction with one's motherhood (Mercer, 2004), which is correlated with work satisfaction (Ladge et al., 2018). The guidance of maternity mentors may also help women advocate for themselves (Gaus & Haul, 2015).

Workload Adjustment

Providing women with time to adjust and grow in their maternal confidence has been found to mediate Work-Family Conflict (WFC). WFC has been found to act as a cross-domain mechanism in which maternal confidence strengthens a woman's intent to remain within her organization (Ladge et al., 2018) and may mediate the experience of WFC. Therefore, during the

perinatal period, institutions should be urged to facilitate university-wide policies that fundamentally express flexibility, not simply modified duties that redistribute work hours from a course load to a service load for the first year postpartum. Institutional policies are essential in setting a culture that supports and values the academic and their family. Returning to work as a new mother is crucial in setting the stage for her approach to work-life integration in subsequent stages of her career (Ladge & Greenberg, 2015). Women in this study who experienced negative circumstances or inflexibility from their institution during the perinatal period expressed a more neutral tone to their outlook in academia, which perhaps could have been mediated by a more supportive and flexible work environment.

Setting forth institutional policies recognizing this pivotal period among women faculty may also lessen feelings of guilt and role conflict (Vitzthum, 2017) as support policies become the institutional standard rather than the departmental exception. These institutional policies must be free of ambiguity, and all women must be made aware of the institutional support available to academic mothers. Participants suggested that expectant mothers be assigned to a liaison through the institution's human resources department to ensure accurate and timely information regarding the services and rights provided to them (Hentges & Pilot, 2021). Clear communication and universal adherence throughout the institution must exist to foster confidence that utilizing such policies will not result in retribution, negative evaluation due to lack of publications and presentations, mommy tracking, or create an undue burden upon colleagues. Therefore, institutional policies providing maternity leave and flexibility must also provide departments and faculty with the resources to fill course loads or compensate faculty who take on an additional load (Gregory, 2021). Mitchel (2004) finds that the most influential factor in how well women can balance their motherhood with their career is the organizational culture, and for

organizations, such a culture benefits morale (Callister, 2006), fosters a positive institutional reputation (Hollenshead et al., 2005), and significantly reduces costs from faculty turnover (Ehrenberg et al., 2003; Schloss et al., 2009).

Childcare

While universal childcare policies should be sought after, institutions should also be responsible for providing reasonable assistance to their faculty who are young parents. Over 30 years ago, the AAUP (1989) recommended that higher education institutions shoulder some of this responsibility, suggesting the benefits of providing faculty with cost-effective on-site childcare facilities. Utilizing campus-affiliated childcare programs may, in turn, benefit the institution's students with hands-on education experience and research opportunities while facilitating the benefits of on-site childcare for faculty (McBride et al., 2012). Such sites also benefit the recruitment of rising academics and facilitate a culture of inclusiveness (Sutton, 2021). When on-site childcare is not feasible due to institutional size, the following options could be implemented: creating a childcare network system for childcare referrals, cooperative arrangements with local childcare facilities to secure childcare openings while arranging a reduced cost for faculty and covering the fee for online childcare membership websites that provide recommended care providers who have been background checked (Purdue, 2021).

Theoretical Implications

In developing the framework for this study, Bronfenbrenner's (1995, 2005) BM and Mercer's (2004) BAM theories were examined and found to support the study's development and have been applied to the interpretation of findings. The application of the BM lies within a systems theory framework wherein the individual, a mother in academia, is best understood in the context of her relationships and the systems she interacts with and which act upon her

(Wilkinson, 2011). As noted in Chapter Two and reiterated through the discussion of role enhancement theory (Barnett & Hyde, 2001; Kinnunen et al., 2006), it has been found that the bioecological effects upon an individual's transitioning and merging identities cannot be compartmentalized. This study reiterated the integrative nature of a woman's developing maternal identity through BAM into her academic identity. Participants did not hold their identities in isolation or view them as distinct entities of themselves; instead, their co-existing identities were acted upon by the interrelationship of the individual's ecological system.

Within this study, critical interactions between the participants' microsystem, mesosystem, and exosystem affected their perceptions of BAM and their ability to transition and restructure their identities. Therefore, when examining the perinatal experiences of women in academia, the BM model provides a framework in which to view the woman and the influences of her spouse, family and colleagues, department, institution, and health care services upon the development of and integration of her identity as a mother scholar. These experiences reiterated that the action in human development lies within the interaction as participants' maternal and academic identities and roles acted upon each other during the perinatal period (Cassells & Evans, 2020). All the more, a critical action upon the academic mother is her institution's influence through its policies, attitudes, and practices during the perinatal period, which make the experiences of women within the academy during the perinatal period a crucial element in considering their transition of BAM.

As noted in the thematic analysis, for academic mothers, the point of identity integration lays at the intersection of work into their maternal identity rather than above or beside it.

Participants' maternal identity became the primary identity (Hay, 2014), coinciding with

Mercer's culmination of BAM, wherein the woman has competency in her abilities to mother

and accepts her identity (Copeland & Harbaugh, 2019; Mercer, 1985; Sleutel, 2003; Thornton & Nardi, 1975). Furthermore, the value one places on an identity can be affected by the influences of the systems acting upon them at their various ecological levels. The value and importance of academia, a definer of identity, changed as participants felt unsupported, devalued, and overworked, which led Samantha to state, "It's such my identity, and I'm miserable." These permeating influences support the need to utilize the theoretical frameworks of BAM and BM to seek compatibility through Gender-Work Identity Integration (GWII), which has been found to support job satisfaction and employee commitment (Reverberi et al., 2022). A high level of GWII may be seen as many participants integrated their maternal identity and experiences into their classroom and student relationships. The process of first-time mothers redefining their roles is significant to continued research on the experiences of mothers in academia, their satisfaction with their work-life integration, their ability to progress into leadership roles, and their longevity in the academy.

In further developing empirical research on the perinatal experiences of first-time mothers within academia, applying the theoretical frameworks of identity theory (Hogg et al., 1995; Stryker, 1987) and identity control theory (Burke, 2016), which stems from identity theory and examines the development and change of identities and their behavior within the social structures the individual is embedded in may continue to expand the literature upon this phenomenon. In addition, consideration should be given to person-environment fit theories (Pasca, 2014; Rauthmann et al., 2021), which examine the interaction between an individual's characteristics and their environment, and the influences of one upon the other should be considered.

Empirical Implications

As noted in the historical literature of academia, the profession was constructed by men and for men (Bailyn, 2003; Fox Tree & Vaid, 2022; Ward & Wolf-Wendel, 2012). The experiences of participants during the perinatal period covey that while the Women's Bill of Rights has made discrimination based upon gender illegal, there is continued neglect of the reproductive demands that are innate to women. While the perinatal period has been recognized as an ongoing period of transition in a woman's life (Camberis et al., 2014; Hwang et al., 2022), the existing policies within institutions center around the ideal worker devoid of not only the physiological and psychological transitions of motherhood, but also the sheer social, relational, and identity reconstruction that takes place during this time (Hwang et al., 2022). Through the transition into motherhood, participants were exposed to what they felt was an academic value system that, if not directly, indirectly through the lack of support and policies, viewed academic responsibilities as superseding their responsibility to their child and family (Moors et al., 2022). This finding was supported by the literature that recognized the foundational incompatibility of the responsibilities and roles of mothering to that of the academy (Mason et al., 2009; Wolf-Wendel & Ward, 2006). When considering motherhood in academia, it is crucial to consider the perinatal period within a woman's lifespan that ushers in one of the most rapid identity-changing transitions wherein biopsychosocial changes in one arena affect changes in the other (Peterson, 1997) and foundationally in identity. Participants all experienced these changes, noting that the difficulty of this period in their lives exceeded what they had anticipated (Choi et al., 2005).

While women in this study remained dedicated to their work, they expressed an inability during the perinatal period to pursue the career goals they had once envisioned, a form of opting out (Bueskens, 2018; Goulden et al., 2011; Shang & Weinberg, 2013; Ward & Wolf-Wendel, 2012). These findings confirm the literature that the conflicting responsibilities of family and

institution often land women in non-ladder rank positions (Hillier, 2021; National Center for Education Statistics, 2022). Furthermore, it reiterates the pressure to obtain tenure before motherhood, as only two of the four tenured participants received tenure after their child's birth. One participant was removed from the tenure track solely due to the unknown variable of how motherhood would affect the submission of her tenure file. These findings align with the literature that only 44% of tenured women have children, compared with 70% of tenured men (American Association of University Women, 2021), a finding that would likely be lower if segregated by age. In male-dominated disciplines, of which no participants were in this study, the percentage is even less (American Society for Engineering Education, 2020; Spoon et al., 2023).

When considering academic rank, women who are not mentored and supported during the perinatal period may be unable to envision beyond the present, which could hold them back from pursuing leadership positions in the future due, in part, to the unknown variable of compatibility with their role as a mother and self-doubt in their abilities (Hermanowicz, 2005). Academic support through department heads, colleagues, and institutional policies during the perinatal period is crucial to encourage and equip mothers with the mentorship and accommodations needed to manage the roles and responsibilities of both identities (Gabriel et al., 2023; Ladge et al., 2018). Rather than a neoliberalist view of faculty (Rosa, 2021), it is imperative to view the human capital and diversity mothers bring to the academy through past, present, and future contributions, reiterating through the third stage of BAM (Mercer, 2004) in which mothers establish their identity, that mother scholars are valued by the institution.

Therefore, consideration of the perinatal period in academia is crucial to understanding the work-life integration needs of women who, during this time, needed adjustments to their

workload—furthermore, recognizing that maternal caregiving responsibilities, an important aspect of bonding and caring for the infant, are a compulsory responsibility during the perinatal period (Williams, 2005) and lessens the freedom of women to participate in outside work engagements and service (Savigny, 2014). As noted in the literature, this led participants to experience self-scrutiny (Trower & Gallagher, 2010) due to their diminished ability to conform to their previous level of work. This, in turn, also led many participants into a push-pull scenario of feeling guilt and inter-role conflict by their inability to be fully invested in either role (Ladge et al., 2018; Oates et al., 2005; Polasky & Holahan, 1998).

During the perinatal period, work-family conflict (WFC) is important to address as women are working to establish a new rhythm, one in which the compatibility of their roles is an important aspect of maternal confidence and in consideration of women's career progression (Allen & Armstrong, 2006; Dizaho et al., 2016; Mercer, 2004). WFC was exasperated by not only the exhaustion of the perinatal period and its significant transitions and changes (Cooklin et al., 2016; Grice et al., 2011; Nelson, 2003), but also the effects of COVID-19 as new precedents were set for the use of technology to run courses despite caregiving responsibilities that would have otherwise kept them out of the office. This technology-driven transference of work into participants' personal lives may further exasperate inter-role conflict (Love et al., 2010) during a crucial time of restructuring one's roles and identity. The implications of the personal and academic stressors experienced by the participants, coupled with the biopsychosocial changes of the perinatal period, align with the literature regarding the effects this can have on women's mental health and self-concept (Falletta et al., 2020; Huang et al., 2022; Kuehner, 2017; Raddon, 2002; Ysseldyk et al., 2019).

Throughout the perinatal period, mothers in academia had to reconcile the conflict between their two identities and their value on each (Laney et al., 2014). Participants walked through Baldwin's (1990) identity process and worked through feelings of othering when they felt disconnected or unable to contribute as they once had (Burke et al., 2019; Raddon, 2002). While most women remained committed to their careers through this season of life, their allegiance changed as the very practice of mothering defined this inseparable part of their identity (Ruddick, 1989; Young, 2015). In reconciling the two identities into that of a mother scholar, the majority of women felt most authentic to themselves and fulfilled (Rose, 2020; Ruddick, 1989).

Limitations and Delimitations

A delimitation in the boundaries of this study is that the recruitment of participants was focused on networks from which mothers are currently in academia. Therefore, this sample of participants largely excluded the voices of mothers whose experiences during the perinatal period altered their career trajectory away from academia. In this study, only one participant had left academia after the first year postpartum, which was attributed to physical complications from childbirth. Another participant was exploring opportunities to exit from academia in the near future. Therefore, the study's findings oppose the prominent discussion of opting out, though participation criteria for this study required that participants remained in academia throughout the first year postpartum. Therefore, an inaccurate view of the retention of mothers in academia could be conveyed.

Additionally, all participants were in a marital relationship at the time of the study, and each discussed the influential role of a spouse during the perinatal period. Therefore, a limitation of this study was that the experiences of single mothers in academia were not included. The lack

of participation from single mothers may confirm the findings of Derrick et al. (2022), wherein single academic mothers who carry the primary caregiver experience a more significant productivity loss than academics who are the lead caregivers, but also in a partnered relationship. Given the time required to participate in this study, such may have been a "natural barrier" (Astin & Davis, 1985, p. 158) to the representation and participation of single mothers in this study.

Another demographic component that was limited was diversity. Demographically, the participants of this study all identified as cisgender women in heterosexual relationships.

Therefore, the experiences of mothers who do not identify with heterosexual, cisgender identities were not voiced through this study. While there may be similarities in the experiences and supports needed for mothers of differing gender identities and sexual orientations, there are dynamics that uniquely encompass the mothering experience of those who differ from the traditional narrative of motherhood and should be considered in future research (Hermann-Wilmarth & Ryan, 2023; Kazyak et al., 2014).

In seeking diversity, this study aimed to pursue maximum variation and included participants from diverse institutions with various discipline backgrounds and professorships, including tenure, tenure-tracked, and career, although the ethnicity of participants was limited. Three ethnicities were represented in this study: 80% were white, 10% African American, and 10% Hispanic, which is an accurate sample representation given from the National Center for Education Statistics (NCES) (2023) findings of full-time faculty delineated by gender and ethnicity. As of 2021, 4% were black females, and 3% were Hispanic (NCES, 2023).

Lastly, while diversity among public and private institutions was present, there were no participants from R1 institutions. This lack of representation may be attributed to Matthew's

(2020) findings and the expectations of research output at these institutions, which, as noted by participants, are incongruent with the perinatal period. However, between 2021 and 2023, there was a 6% increase in women presidents at Research 1 (R1) institutions (Silbert, 2023). With this growth in female leadership, expanded opportunities may exist for women and mothers at R1 institutions.

Recommendations for Future Research

This study promoted an understanding of the experiences of women faculty in the United States during the perinatal period and how these experiences affected the integration of their identities and outlook on continuing in the academy. The following suggestions for future research are derived from this study's findings, the empirical literature, the transformative framework, and the theoretical framework that guided this study. While far from exhaustive, the following discussion includes suggestions for future research.

As noted in the limitations section, this study was limited to participants who were cisgender and married. Therefore, utilizing qualitative research to examine the experiences of all mothers in academia may aid in seeking fairness and promoting opportunities for mothers to succeed and thrive in academia, uplifting institutions to promote intellectual spaces that recognize the merit and skills of all academics. Therefore, future research should be aimed at examining the experiences of single mothers, non-heterosexual mothers, and adoptive mothers in academia. Examining the unique life transitions surrounding motherhood for these demographics may provide future insight that promotes the longevity of mothers from all demographics in academia, thus propelling a mission of education that seeks to advance intellectual fortitude that progresses society and values the betterment of all people.

To continue the efforts of policies that support and promote the importance of the perinatal period for working mothers, a systematic review of the existing policies and accommodations surrounding the perinatal period is suggested. Examining the existing policies within organizations and companies in multiple professional industries may aid in laying a framework for future advocacy and policy implications within higher education institutions that would help women transition during the perinatal period as they integrate motherhood into their return to their careers. Such research could improve the perinatal experiences of the mother-child dyad by exploring ways to provide mothers with employer-based accommodations that communicate the institution's value of the women and her contributions to the university.

In examining policies, research into the representation of women at public and private universities considering the literature findings, which pointed to women scholars landing in non-ladder-rank academic positions, should be examined. In this study, 60% of participants (n= 6) were either tenured or on the tenure track, meaning that the participants in this study did not represent the findings in the literature. However, of the four tenured participants, three were at public institutions, and the two on the tenure track were also at public institutions. Therefore, faculty appointments at public institutions accounted for 83% of these participants. Yet consequently, 65% of the top 20 universities in the U.S. are private institutions (OCallaghan, 2024), all of which offer tenure. Therefore, to understand the differences mothers may experience between private and public institutions and their ability to obtain ladder ranks at each, future qualitative studies, along with quantitative or mixed methods studies, should examine the employment of mothers at these institutions and their obtainment of tenure-track and tenure positions.

Lastly, understanding the phenomenon of women in academia during the perinatal period could be expanded upon through various qualitative methodologies. Among such could be case studies to compare and analyze the experience of mothers at chosen universities. Ethnographic research could further explore the experiences, beliefs, and behavior (LeCompte & Preissle, 1993) that influence motherhood in the culture of academia. Qualitative longitudinal research (Balmer & Richards, 2022) could explore academic mothers' experiences throughout the perinatal period and during the first five years of the child's development. Such research could provide insight into the development of maternal identity and confidence of mothers throughout the critical time of early childhood, further understanding how the perinatal period affects the retention of mother scholars as their child develops.

Conclusion

This qualitative hermeneutic phenomenological study endeavored to understand the central research question: what are the lived perinatal experiences of women faculty in academia in the United States with respect to the integration of their academic and maternal identities? The theoretical framework of Bronfenbrenner's (1979, 2005) BM and Mercer's (2004) BAM theories supported this study's research design. Through the recruitment of 10 participants at both public and private institutions and data collection through questionnaires, semi-structured one-on-one interviews, and letter-writing experiences, the participants shared their rich experiences of transitioning through the perinatal period and identity shifts from academic to mother scholar.

The collected data was analyzed utilizing van Manen's (2016) work and Saldaña's (2016) and Patton's (1999) methods of coding and data triangulation to develop five major themes and sub-themes. The derived themes encapsulate the essence of the participants' experience of the phenomenon (van Manen, 1990, 2016) of the perinatal experiences of mothers

in academia and the effect these experiences had upon their identity as a mother and an academic. Among the findings, two crucial implications included the need participants had for supportive relationships and institutional policies during the perinatal period, along with a recognition of the dynamic changes that occur in one's identity of becoming a mother. Based on the study's findings, the study's implications were examined, and recommendations for future policy, practice, and research were presented.

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Appendix A

IRB Approval

LIBERTY UNIVERSITY. INSTITUTIONAL REVIEW BOARD

September 25, 2023

Elizabeth Debolt Lucinda Spaulding

Re: IRB Exemption - IRB-FY23-24-223 A Phenomenological Study of the Perinatal Experiences Shaping a Woman's Identity in Academia

Dear Elizabeth Debolt, Lucinda Spaulding,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:104(d):

Category 2.(iii). Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording) if at least one of the following criteria is met:

The information obtained is recorded by the investigator in such a manner that the identity of the human subjects can readily be ascertained, directly or through identifiers linked to the subjects, and an IRB conducts a limited IRB review to make the determination required by §46.111(a)(7).

For a PDF of your exemption letter, click on your study number in the My Studies card on your Cayuse dashboard. Next, click the Submissions bar beside the Study Details bar on the Study details page. Finally, click Initial under Submission Type and choose the Letters tab toward the bottom of the Submission Details page. Your information sheet and final versions of your study documents can also be found on the same page under the Attachments tab.

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at <u>irb@liberty.edu</u>.

Sincerely,
G. Michele Baker, PhD, CIP
Administrative Chair
Research Ethics Office

Appendix B

Social Media Recruitment

ATTENTION MOTHERS IN ACADEMIA: I am conducting research as part of the requirements for a Philosophy of Education degree at Liberty University. The purpose of my research is to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect their maternal and academic identities and outlook on continuing in the academy. To participate, you must be a woman who became a mother with your first child within the last three years while holding a faculty position in academia that included teaching, scholarship, and service responsibilities while pregnant and during the first nine months postpartum.

Participants will be asked to

- 1. Complete a short-answer questionnaire through Google Forms, which should take about 20 minutes.
- 2. Participate in a one-on-one semi-structured interview that will be conducted through Microsoft Teams, which will be approximately 45 to 60 minutes in length.
- 3. Complete a letter-writing exercise or audio recording in response to provided instructions, which should take approximately 15 to 20 minutes to complete.
- 4. Verifying your data through member-checking. This will take approximately 15 minutes to complete.

If you would like to participate and meet the study criteria, please click here or direct message me/contact me at ______. An informed consent document is provided as the first page of the questionnaire. Participants will receive a \$15 Amazon gift card at the conclusion of all data collection methods as a token of appreciation for participation.

Appendix C

Recruitment Email

Dear Potential Participant,

As a doctoral candidate in the School of Education, at Liberty University, I am conducting research as part of the requirements for a Ph.D. in Educational Leadership. The purpose of my research is to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect their maternal and academic identities and outlook on continuing in the academy, and I am writing to invite you to join my study.

Participants must be a woman who became a mother with their first child within the last three years while holding a faculty position in academia that included teaching, scholarship, and service responsibilities while pregnant and during the first nine months postpartum.

Participants will be asked to complete a short-answer questionnaire, participate in a one-on-one semi-structured interview through video conferencing, complete a letter-writing exercise or audio recording in response to provided instructions, and member checking through reviewing your transcribed interview and the study's themes and categories. It should take approximately 2 hours or less to complete the procedures listed. Names and other identifying information will be requested as part of this study, but participant identities will not be disclosed.

To participate, please click <u>here</u> to complete the consent form and questionnaire. If you meet the participant criteria, I will email you to schedule a convenient time for an interview.

A consent document is also attached below to provide additional information about my research. If you choose to participate, you will need to sign the consent document at the beginning of the linked questionnaire indicating you have read the consent information and would like to take part in the study.

Participants will receive a \$15 Amazon gift card when all data collection methods are completed as a token of appreciation for participating.

Sincerely,

Elizabeth DeBolt Ph.D. Candidate

Appendix D

Informed Consent

Title of the Project: A Phenomenological Study of the Perinatal Experiences Shaping a Woman's Identity in Academia

Principal Investigator: Elizabeth DeBolt, Doctoral Candidate

School of Education, Liberty University

Invitation to be Part of a Research Study

You are invited to participate in a research study. To participate, you must be a woman who became a mother with their first child within the last three years while holding a faculty position in academia that included teaching, scholarship, and service responsibilities while pregnant and during the first nine months postpartum. Taking part in this research project is voluntary. Please take time to read this entire form and ask questions before deciding whether to take part in this research.

What is the study about and why is it being done?

The purpose of this study is to understand the meaning women faculty in academia in the United States ascribe to their perinatal experiences and how these experiences affect their maternal and academic identities and outlook on continuing in the academy.

What will happen if you take part in this study?

If you agree to be in my study, I will ask you to do the following:

- 1. Complete a short-answer questionnaire through Google Forms, which will take approximately 20 minutes to complete.
- 2. Participate in a one-on-one semi-structured interview that will be conducted and recorded through the video conferencing platform of Microsoft Teams. A backup of the audio will also be recorded on a password-protected smartphone. The interview will be approximately 45 to 60 minutes in length.
- 3. Complete a letter-writing exercise or audio recording following the provided instructions. This reflection activity will take approximately 15 to 20 minutes to complete.
- 4. Verifying your data (member-checking). While not required, you will be provided with and encouraged to review your interview transcript and the study's themes and categories for accuracy. This will take approximately 15 minutes to complete.

How could you or others benefit from this study?

Participants should not expect to receive a direct benefit from taking part in this study.

Benefits to society include the ability to gain insight into how the perinatal period affects the identity and transitionary time of women faculty becoming mothers while in academia. Gaining insight into how these experiences influence academic mothers' identity development and career progression may facilitate the reduction of risk factors that may pertain to perinatal women in this field and provide insight into potential ways to mediate the challenges they face. Furthermore, this study may provide insight into opportunities for promoting gender diversity by retaining academic women faculty within higher education institutes, encouraging their career progression, and facilitating mentoring opportunities for current and future mothers.

What risks might you experience from being in this study?

The expected risks from participating in this study are minimal, which means they are equal to the risks you would encounter in everyday life. The risks involved in this study include the possibility of psychological stress from being asked to recall potentially difficult and stressful periods of your life. To reduce risk, upon request, I will provide a resource with further information on postpartum mental health, along with a link to a directory for mental health professionals, should participants wish to further discuss any of the experiences they share during the interview.

How will personal information be protected?

The records of this study will be kept private. Published reports will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records.

- Participant responses will be kept confidential by replacing names with pseudonyms.
- Questionnaire data will be submitted through a password-secured Google Form link, downloaded to a password-locked computer for five years, and then deleted. The Google Form link will be deleted upon the study's completion.
- Interviews will be conducted in a location where others will not easily overhear the conversation.
- Data collected from you may be used in future research studies or shared with other researchers. If data collected from you is reused or shared, any information that could identify you, if applicable, will be removed beforehand.
- Data will be stored on a password-locked computer. After five years, all electronic records will be deleted.
- Visual and audio recordings from the interview and if applicable, audio from the letterwriting exercise will be downloaded and stored on a password-locked computer for five years and then deleted. Only the researcher will have access to these recordings.
- The letter-writing exercise responses received through Google Drive and email will be stored on a password-locked computer for five years and then deleted. The Google drive link will be deleted upon the study's completion.

How will you be compensated for being part of the study?

Participants will be compensated for participating in this study. At the conclusion of all data collection methods, participants will receive a \$15 Amazon gift card sent via email as a token of appreciation for participating.

Is study participation voluntary?

Participation in this study is voluntary. Your decision whether to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, please contact the researcher at the email address included in the next paragraph. Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Elizabeth DeBolt. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at You may also contact the researcher's faculty sponsor, Dr. Lucinda Spaulding, at

Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the IRB. Our physical address is Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA, 24515; our phone number is 434-592-5530, and our email address is <u>irb@liberty.edu</u>.

Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human subjects research will be conducted in an ethical manner as defined and required by federal regulations. The topics covered and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.

Your Consent

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be emailed a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and ha answers. I consent to participate in the study.			
☐ The researcher has my permission to audio-record and video-record me as part of my participation in this study.			
Printed Subject Name			
Signature & Date			

Appendix E

Questionnaire

Name:					
Gender:					
Age:					
Race/Ethnicity:					
Degrees Earned and Discipline:					
Were you employed at an academic institution during your pregnancy and at least the first nine months postpartum: Yes. No.					
Are you currently employed: Yes. No.					
If not, please briefly explain what led to stepping away from employment.					
Please denote the type of academic institution(s) that you teach at or taught at:					
2-year college 4-year college					
Is your institution of employment: Private or Public					
Check all forms of courses that you teach: Residential. Remote Online Hybrid					
and/or Asynchronous					
What discipline(s) do you teach at your institution(s):					
What degree level(s) do you teach:					

Teaching:	Scholarship:	Service:
Please briefly desc	ribe your work history within acade	emia, including positions held at
-	ur position within your institution(s)	_
Please describe you	ur current academic-related respons	sibilities, along with any changes that
occurred in duties	while pregnant and/or within the fir	rst year following birth:
During your pregr	nancy, please briefly describe any pe ffected your work and/or family life	erceived stressors that you
	, did you benefit from any work-rela	ated accommodations:
Yes. No.		
•	eedom to ask for work-related accor	nmodations during your pregnancy:
Yes. No.		

If yes, please describe them:
If on the tenure track, did you choose to utilize Stop the Clock policies? Yes. No. N/A.
Please explain why or why not
Aside from the Family Medical Leave Act, does your institution have a formal family leave policy? Yes. No.
If yes, please provide the title of the policy along with a brief description of what it entails:
Did you utilize any form of leave prenatally or postpartum: Yes. No. If no, please describe why:
If yes, when was your leave taken, and how long was your leave:
If yes, did you continue to work in some capacity while on leave? Yes. No.
Please elaborate if you answered yes.

Aside from any leave taken, did you receive any accommodations to your workload within
the first year postpartum? Yes. No.
If yes, please describe:
If breastfeeding occurred, please describe the duration and any notable ways your work affected your experiences of breastfeeding:
How many children do you have?
If more than one child, would you briefly share a timeline that describes your academic journey in relation to the time of their birth(s) or adoption:
What is your child's date of birth: month/year:
Please provide your preferred days and times for conducting our interview and your preferred contact:

For the purposes of preparing for the interview, the following terms are defined:

- **Becoming a mother-** The transitions and challenges women progress through as they solidify their maternal confidence and identity.
- **Maternal confidence-** A mother's perceptions of and belief in her ability to understand her baby's needs and to provide apt skills to meet such needs for care.
- **Matrescence-** The transformative psychological and physiological process of a woman becoming a mother.

- **Perinatal-** A time encompassing the entirety of the prenatal period through the first year postpartum.
- **Postpartum-** For this study, postpartum encapsulates the time immediately following the birth of a child and extends through the first year of the child's life.
- Work-Family Conflict- Individual perceptions of the inner conflict and interferences between work and family (Nomaguchi & Fettro, 2019).
- Work-life Balance- Creating an equilibrium to balance the unequal output given to an individual's career and life roles by compartmentalizing each responsibility.
- Work-life Integration- Blending life roles and career responsibilities to foster the intersection of one's roles and identities.

Appendix F

Individual Interview Questions

- Would you share a bit about your background, such as where you are from and your upbringing, including the dynamics of your parent's/caregiver's work and whether your mother worked outside the home? CRQ
- 2. What factors shaped your desire to pursue a career in academia? CRQ
- 3. What are some of the experiences, particularly as a woman, that led to developing your academic identity? CRQ
- 4. Before motherhood, how would you describe your identity in academia as a woman, and did you foresee motherhood being integrated into this identity? CRQ
- 5. Would you explain your experiences with other mothers in academia during your doctoral work and within your current role in academia? CRQ
- 6. When you found out you were pregnant, what were your initial thoughts and feelings?
 CRQ
- 7. Would you describe the experience of revealing your pregnancy to your supervisor and colleagues and your perceptions of their support? SRQ2
- 8. Reflecting upon your pregnancy, were there any situations or experiences that influenced your ideas of motherhood within academia, either positively or negatively? SRQ2
- 9. How would you describe yourself/your identity during the prenatal period? CRQ
- 10. Describe how your work responsibilities influenced the ways in which you were able to prepare physically and emotionally for the arrival of your child. SRQ1
- 11. During your pregnancy, what were your expectations for returning to work after the birth of your child? SRQ2

- 12. Would you describe the impact of your child's birth on your maternal identity? CRQ
- 13. In what ways did you experience an overlap of your academic identity and responsibilities during your parental leave? SRQ1 & SRQ2
- 14. How would you describe your transition into motherhood during the early postpartum period? CRQ
- 15. At what point in the perinatal period did you begin to think of yourself as a mother?
- 16. What were your feelings toward returning to work at the end of your parental leave?
 SRQ1 & SRQ2
- 17. What were your initial experiences when you re-entered academia after your child's birth? SRQ1 & SRQ2
- 18. What were some of the logistics specific to motherhood and academia that you had to manage during the first-year postpartum? SRQ1 & SRQ2
- 19. What were some of the challenges you experienced within the academy during the first year postpartum, and how did this affect your transitioning identities of becoming both a mother and an academic? SRQ1
- 20. During the perinatal period, how do you believe your work in academia affected your maternal confidence? SRQ1
- 21. How did your physical (physiological changes and health) and psychological (stress, burnout, anxiety, mood disorders, etc.) perinatal experiences affect your role and identity in academia? SRQ2
- 22. How did the perinatal physical (physiological changes and health) and psychological (stress, burnout, anxiety, mood disorders, etc.) demands of academia affect the development of your maternal identity? SRQ1

- 23. Though the presence of female faculty is no longer an exception in higher education, did you experience a change in the perception of your capabilities or dedication to academia after becoming a mother? SRQ4
- 24. As a working mother in academia, what was your perception of the expectations placed upon you, whether said or unsaid, by society and your academic institution? CRQ
- 25. Reflecting upon your workload during the perinatal period, what were your expectations compared to reality? SRQ2
- 26. In considering your responsibilities in scholarship, service, and teaching, how has becoming a mother impacted or how do you anticipate it impacting how you dedicate your time to each responsibility? SRQ2
- 27. In what ways did your maternal and academic roles change your work-life relationship?
 SRQ1 & SRQ2
- 28. Could you describe any specific instances in which you felt that your responsibilities and identities as a mother and academic were at odds? CRQ
- 29. What experiences did you have in the attitudes and family friendliness of the academy, both staff and students, during the perinatal period? SRQ3
- 30. What resources and support do you feel a mother most needs from the academy during the perinatal period? SRQ3
- 31. Would you please describe your support system during the perinatal period and their affect upon your transition into BAM? SRQ3
- 32. In what ways did your support system (including those in academia) affect your academic identity during the perinatal period? SRQ3

- 33. In what ways do you believe your perinatal experiences within academia shaped your view of motherhood? SRQ1
- 34. In what ways do you believe the perinatal experiences of becoming a mother shaped your view of academia and your identity as an academic? SRQ2
- 35. The metaphor of the superwoman has applied to working moms who feel that they must not relinquish any of their responsibilities but rather manage it all. Could you describe ways in which you experienced this, if at all, during the perinatal period? CRQ
- 36. Overall, how has motherhood affected your outlook on your career in academia? SRQ4
- 37. Is there anything else you would like to include in our discussion that you believe to be important in the transition of becoming a mother in academia during the perinatal period?
 CRQ

Appendix G

Mental Health Resources

Maternal mental health resources for continued learning and professional care.

• **National Maternal Mental Health Hotline-** 24/7, free, confidential support. 1-833-943-5746 (1-833-9-HELP4MOMS)

https://mchb.hrsa.gov/national-maternal-mental-health-hotline.

• **Postpartum Progress-** Many resources for mothers in an informal yet informative and directive layout.

https://postpartumprogress.com/

• **Postpartum Support International:** Numerous opportunities for learning, discussion, webinars, newsletters, and free phone consultations. Local social support groups are also listed.

https://www.postpartum.net/

• The Blue Dot Project

Raises awareness while providing testimonies and resources for mothers. https://www.thebluedotproject.org/

Directory of perinatal mental health professionals.

• Postpartum Support International Directory:

https://psidirectory.com/

Appendix H

Letter-writing Exercise

Instructions

You are asked to complete a letter-writing exercise in response to the four prompts. You may write your letter through Microsoft Word or Google Docs. If you prefer, you may narrate your replies to each prompt through voice recording software on your computer or smartphone. The letter will be electronically submitted through email or the secure Google Drive link provided following the prompts. Should an audio recording be chosen, please record the file as either a mp3, .m4a, or .wav and use the Google Drive link for submission.

Please complete the letter-writing exercise within ten days following our interview.

Letter-writing Prompts:

Please utilize the prompts below to compose a letter, written or narrated, of advice that could be helpful for a newly pregnant mother in a faculty role in academia. Please provide at least one paragraph for each prompt.

- 1. What do you wish you knew while pregnant and in the first year postpartum that would have bettered your experiences as an academic and mother?
- 2. What guidance and suggestions do you have for the journey of becoming a mother in academia?
- 3. Based on your experiences, offer advice regarding support systems during the perinatal period.
- 4. In closing, offer any words of guidance, encouragement, and even grit for the transition of becoming a mother in academia.

Please email the completed letter to	or	
Please submit the Word document, C	Google Doc, or narrated letter to the following Goog	le Drive
link:		

Appendix I

Researcher's Memoing and Journaling

- Waiting- I submitted for IRB approval on August 21, 2024. We are now into September, and I am still waiting for any news. It is hard to have pushed so hard to get to this point and then to feel like I am at a standstill. Hopefully, it will be any day.
- I cannot believe it! While on a nature walk with my kiddos, I received an email on September 25th stating that I had received IRB approval! It feels like the checkered flag has been waived, and it is go time. I was trying hard to be present in my day with kids, but my mind was racing with all that I wanted to do that afternoon, including contacting gatekeepers and reaching out to social media page administrators.
- I feel over the moon- not only did I receive IRB approval this morning, but my first informed consent and questionnaire were submitted this evening! I'm praying that this continues to happen at a rapid speed.
- I conducted my first two interviews today, September 29th, 2023! Remarkable. These women and their experiences challenged me, made me laugh, and provided excellent insight into the phenomenon as we worked through the semi-structured interviews. I was taken aback, though, by the length of the interviews. I never want to cut an interview short; therefore, from now on, I will not schedule an interview with less than a 2-hour block of availability.
- It is the end of September, and I have 19 individuals who have completed the first informed consent and questionnaire. While not every individual qualified for the study, I have more than adequate participants and have been working non-stop to establish contact and arrange interviews.

- October- The stories of these women are phenomenal. Inspirational and gut-wrenching at the same time. The experiences of these intellectually gifted and determined women make me question my resolve in academia but also remind me that I'm keeping what feels, to me, the first things first in making my parenting the priority in my life. I have listed below some observations from my interviews.
- Interesting finding: the experience of pregnancy for some was not great, far from a butterfly experience, but amid the hardship of the pregnancy, these participants experienced a state of maternal protectiveness, a sign of maternal confidence.
- Spousal support- I had a strong inclination that this would be critical for most women, as it was for me in every pregnancy, but especially my first. My husband would sit with me in the middle of the night to keep me company while I nursed- it felt like such a partnership. For many of these women, their partner's role was important. However, I am finding that while there was a willingness among many husbands to help, sometimes they were unaware of how to do this.
- The infertility struggles of participants are hitting home as we once walked through a season of being told we would never have biological children but God.
- There are times that my heart is just breaking for the experiences of these women- there has to be a better way.
 - "Don't Know What You Don't Know" seems to be a resounding experience.
- Two participants stated that they were not the person to stand in front of the class and give presentations, but that they both felt drawn to teach- this, to me, shows an innate nurturing side of a woman to want to guide and direct, imparting knowledge.

- This statement, "Yep, it has not shaken me at all. But that I just feel like I have to defend it sometimes." This participant was resolute in her calling to academia. It kind of stinks that sometimes the right path means swimming against the current.
- October- I grossly underestimated the time it takes to ensure accurate transcription. It has been meaningful to relive the interview as I watch the recordings and review the transcripts. I definitely have to keep carefully reviewing the transcription provided by Microsoft Teams, such as when "water birth" was transcribed as "water burger."
- November- They are right. You just can't do it all. I think this is a complex concept for me to wrestle with. My counter from hearing their stories is that you can, but to what quality of productivity and quality of life? Maybe it is that you can do it all, just not all at the same time. However, even that does not seem to fit with academia, as it sounds like slowing down could lead to plateauing or lack of future opportunities as one seems less committed and has less research output.
- November and Early December- As I continue to review transcripts, I am drawn into their life stories. The resolve and drive that got them through their Ph.D. work continue to be a silent echo in their mothering in academia. They are determined, driven, and making ground; whether they see it or not, they are sending messages to future female academics. All the more, I see the need for research to support and value these women; this is what they want and need. They were valuable to the investment and transfusion of knowledge before children, and they continue to be after. How do we ensure that the human capital these mothers bring to the ivory tower is preserved in quantitative measures of output and production? Though not explicitly stated, I sense in their tone and remarks that being an excellent professor who emotionally invests in the success of their students is often not enough in academia.

- Late December- I am going to pause for the week of Christmas. Completing this dissertation is critical, but you only get so many Christmases.
- Late December- It is funny how words spoken by participants pop into my head as I work and interact with my children day-to-day. One participant also mentioned a technique she uses with her child, which she has transferred to her work environment. I'm reflecting on ways that I do this without even realizing it.
- January 6th Wow, all data has been transcribed and coded. I am reducing the codes into categories; now it is time for thematizing. I will be reviewing Chapter Three as I work on deciphering essential and incidental themes.
- January 11th- I have emailed Dr. Spaulding to discuss themes, and I am continuing to condense themes and create sub-themes.
- Late January- Question of the month: "Does the phenomenon still hold its foundational meaning if the theme were to be removed?"
- February- I cannot get over the participants' rich and descriptive in-vivo quotes. Their words shine a spotlight on the phenomenon. I am working late into the night and am exhausted, but I am loving the process of capturing the essence of this phenomenon through these mothers' words and my interpretations as the researcher.

Appendix J

My Letter-writing Exercise

1. What do you wish you knew while pregnant and in the first year postpartum that would have bettered your experiences as an academic and mother?

I was in a unique position as a teaching assistant, and often, it felt like my pregnancy was not really seen. Sweet colleagues were supportive, but I wish I had known it was okay to back off a little. During the prenatal period, I wanted to excel so that I would not be forgotten when I had to step away. While I was able to invest in my pregnancy through childbirth classes, and the excitement over our first child was immense, I wish I had slowed down a little bit.

2. What guidance and suggestions do you have for the journey of becoming a mother in academia?

Find someone to invest in you. I never felt like I knew what it meant to be both a mother and an academic, and I fell into a false assumption that these two roles were incompatible with the mother and academic I wanted to be. While, to some extent, that may be true, I wish I had pursued finding someone doing both and asked questions and gotten input into my career as a mother. Find someone who has walked this past and ask them to invest in you, point out your blind spots, and encourage you through the postpartum period.

3. Based on your experiences, offer advice regarding support systems during the perinatal period.

Your husband or partner is key! That relationship is so important, so be sure to invest in your marriage or partnership. My husband has been a constant throughout the perinatal period and in my career. I also found the postpartum period to be lonely. Sometimes, this is unavoidable, but as much as possible, do not walk this journey alone. Also, do not be afraid to let your child enter

academic discussions, meaning let your motherhood be visible. Reframe the narrative and see motherhood as an asset to being an academic; then, find people who will support you in your mothering and academic growth. I wish I had done this more.

4. In closing, offer any words of guidance, encouragement, and even grit for the transition of becoming a mother in academia.

Do not be afraid of embracing the changes that becoming a mother will bring in your life. It is okay if things that you thought would forever be true of you no longer are, and it is OK if you take time away to enjoy the gift of life and motherhood. You will look back and see things that you wish you had done differently but do not live in that. Use those experiences to pivot going forward and enjoy the journey- it is all a blessing.