

## RESEARCH ARTICLE

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# Development of first-time mothers' sense of shared identity and integration with other mothers in their neighbourhood

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## Abstract

Mothers' social integration with other mothers in the same residential area has been shown to be beneficial for their health and well-being. The socio-psychological resources afforded by other mothers aid the transition to motherhood. However, much less is known about the processes whereby mothers integrate with other local mothers. Therefore, we analysed first-time mothers' experiences of social integration with other mothers in the same neighbourhood. Through three waves of semi-structured interviews, we followed eight Finnish first-time mothers' everyday lives for a year. The narrative analysis of these longitudinal interviews revealed three story types – *social integration*, *social exclusion* and *social disconnection* – that depicted mothers' different experiences of integration with other local mothers. The perceived similarity of experiences, goals and interests related to motherhood enhanced the development of a shared sense of identity and supported integration with other local mothers. We discuss our findings in relation to the social identity model of identity change (SIMIC).

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**KEYWORDS**

first-time mothers, neighbourhood, shared identity, social identity, social identity model of identity change, social integration

## 1 | INTRODUCTION

Becoming a mother is a major transition in a woman's life (Miller, 2007). It involves changes at various levels from everyday practices to social relations and identities which have widespread ramifications for one's sense of self, health and well-being. Mothers' social integration with other mothers has a profound impact on the smooth transition to motherhood (Alstveit, Severinsson, & Karlsen, 2010; Eronen, 2020). Social integration refers to participation and involvement in social relationships such as contacts, friendships and group memberships in one's social environment (e.g., Grazia & Herrero, 2004). However, previous studies have failed to examine how social integration with other mothers is established during this process. The purpose of this article is to increase understanding of first-time mothers' adaptation to their new identity by examining in detail their integration with other mothers in the same neighbourhood during their first and second year of motherhood.

### 1.1 | Motherhood and social relations

Although becoming a mother is generally experienced as a positive life transition (Harwood, McLean, & Durkin, 2007), it can also affect and reduce mothers' existing social relations (Wrzus, Hänel, Wagner, & Neyer, 2013), and be associated with experiences of loss of professional and social life (Lee, Vasileiou, & Barnett, 2019). These losses predict adaptation problems such as post-partum depression and anxiety (Leahy-Warren, McCarthy, & Corcoran, 2015; Seymour, Giallo, Cooklin, & Dunning, 2015).

However, becoming a mother also opens opportunities for new social relations. While new mothers' relations with family members remain fairly constant, there is often a shift from friends without children to those with children (Wrzus et al., 2013). These new relations are important, as they offer companionship and opportunities to share and compare experiences (Alstveit et al., 2010; Eronen, 2020). Other mothers in the same residential area can offer easily accessible company and social support including practical help, emotional support and advice for mothers whose social relations and daily lives with young children are often anchored close to home (Witten, Kearns, McCreanor, Penney, & Faalau, 2009). Furthermore, mothers' increased interest in the local community can reinforce their desire to integrate with other local mothers (Strange, Fisher, Howat, & Wood, 2015).

Social integration with other mothers can be challenging. For instance, perceived privacy norms may limit interactions between mothers in residential contexts (Warner & Andrews, 2019), and perceived mothering norms may provoke a fear of judgement and rejection, thus leading to an avoidance of contact with other mothers (Lee et al., 2019). Therefore, municipalities and non-governmental organisations offer various local groups to support mothers' integration with each other (Bennett et al., 2017; Nolan et al., 2012). Although mothers often find these groups helpful (Glavin, Tveiten, Okland, & Hjälmhult, 2017; Strange, Fisher, Howat, & Wood, 2014), some mothers may experience a mismatch with these groups or feel excluded by other participants (Barrett, Hanna, & Fitzpatrick, 2018; Davies & Harman, 2017). Although the literature sheds some light on how mothers integrate with other mothers, it is typically limited to specific contexts (e.g., playgroups, playgrounds) and remains theoretically fragmented and underdeveloped. In this longitudinal qualitative study, we used the social identity approach to explore mothers' experiences of building social relations with other local mothers as part of their everyday lives.

## 1.2 | Social identity model of identity change

The social identity model of identity change (SIMIC) is a social-psychological approach to adapting to life transitions (Haslam, Haslam, Jetten, Cruwys, & Steffens, 2021; Jetten, Haslam, Iyer, & Haslam, 2009). Drawing from the social identity approach to health (SIAH: Haslam, Jetten, Cruwys, Dingle, & Haslam, 2018), it demonstrates that identifications with groups provide socio-psychological resources, such as a sense of belonging, personal control and social support (Cruwys, Haslam, Dingle, Haslam, & Jetten, 2014; Greenaway et al., 2015); hence, group memberships are beneficial for individual health and well-being.

When individuals move between groups, whether by choice or not, they can lose resources provided by groups and become vulnerable to stress and ill health (Haslam et al., 2021; Jetten et al., 2009). Maintenance of meaningful pre-transition group memberships is thought to be beneficial for adjustment, and this maintenance is more likely the more group memberships there have been before the transition (the 'identity maintenance' hypothesis). These existing group memberships can also facilitate the gain of new group memberships after a transition by providing a potential basis for the development of new identities and resources such as skills (the 'identity gain' hypothesis) (Iyer, Jetten, Tsivrikos, Postmes, & Haslam, 2009). For example, members of existing groups may inform mothers about how and what kind of new groups they could join with the baby.

The predictions of this model have received support from many studies in different contexts using different methods (see Haslam et al., 2021 for a recent review). However, some recent studies suggest that new group memberships are not always related to better adaptation to life changes (Cruwys, Ng, Haslam, & Haslam, 2020; Seymour-Smith, Cruwys, Haslam, & Brodrigg, 2017). In relation to motherhood, Seymour-Smith et al. (2017) found that although the loss of old group memberships was related to mothers' reduced mental health and that the maintenance of old group memberships was related to enhanced mental health, the formation of new group memberships did not have the expected health benefits. Seymour-Smith et al. (2017) presented a call for qualitative studies to more fully understand these processes.

One potential source of such inconsistencies is the possibility that the old and new groups may be incompatible in some way, causing tension or discomfort for the individual. SIMIC proposes that one's ability to maintain or gain group memberships may be affected by the compatibility of the goals and interests attached to old and new social identities (Haslam et al., 2018; Iyer et al., 2009). Another potential source of inconsistency is that the development of any meaningful group membership may take time (Seymour-Smith et al., 2017). In the literature, meaningful group membership is often defined as social identification, that is, the perception of oneself as a member of a social category (Haslam et al., 2018). It has also frequently been used to refer to a shared identity, which is about 'seeing myself and seeing others as united through belonging to a common category, and about assuming others do likewise' (Neville, Novelli, Drury, & Reicher, 2020, p. 2). However, these definitions obscure the lived experience of joining groups which is often a gradual process, such that a person may relate differently to a new potential group depending on how social identification and shared identity develop over time.

New mothers are an ideal but less studied group for exploring the meaning of new groups in depth, as the transition to motherhood is often associated with changes in social relations and a heightened need for other mothers' company and social support. The aim of our longitudinal qualitative study was to analyse Finnish first-time mothers' experiences of integration with other mothers in two neighbourhoods of Helsinki to understand how mothers come to adopt a common group membership with other local mothers and how and when this group membership can support their life transition. We followed mothers' everyday lives for 1 year during the first and second year of their children's development. We adopted a narrative approach (Thomson, 2007), which together with qualitative longitudinal data and multiple case studies, allowed us to explore in detail each mother's process of integration with other local mothers over time.

## 2 | METHOD

### 2.1 | Participants

The participants of this study comprised eight Finnish first-time mothers. They were aged between 26 and 37 years. Their children were aged between 3 and 9 months at the time of the first interview and were all cared for by their mothers at home. Six participants had university degrees, and two had an upper-secondary education. One was a single mother; the rest lived with their male spouse and child. Participants were recruited through a research invitation distributed at a public child health care clinic ( $N = 2$ ) and the neighbourhood church's baby club ( $N = 6$ ).<sup>1</sup> These contexts reached the local mothers well; over 90% of mothers attend the local public child health care clinic, and the church's baby club attracted visitors across religious groups. The research received a positive ethical statement from the Ethics Committee of the Tampere Region. To protect the participants' privacy, our data are not publicly available. All names have been pseudonymised to protect the identities of the participants and other people.

### 2.2 | Interviews

Three waves of semi-structured interviews were conducted by the third author at 6-month intervals in participants' homes, in cafés and at the local community centre. Overall, the interview guide covered interviewees' everyday lives in the neighbourhood, their social relations with friends, family and others, and their thoughts about maternity and diversity. This article focuses on the parts of the interviews that discussed participants' social relations with other local mothers. Interviewees were encouraged to talk about their current experiences, reflect on past experiences and ponder future hopes in terms of social relations. Participants reported their experiences in various contexts within their local neighbourhood, including their homes, yards, parks, playgrounds, clubs, events, social media, nurseries, various forms of formal and informal groups. The questions relating to social relations with other local mothers in each interview are presented in Appendix S1. The interviews were recorded for later verbatim transcription. The interviews were conducted in Finnish, and the extracts were translated by the first author. The interview length ranged from 55 to 188 min, with an average of 93 min.

### 2.3 | Analysis

We analysed the data using a narrative approach and phenomenological epistemology considering the narratives as tools for exploring participants' experiences (Bamberg, 2010). Narrative analysis also afforded an opportunity to explore the diversity in stories and the developmental process over time, which may not be captured by the much-used thematic analysis in the SIMIC literature. The aim of the narrative analysis process was to generate participants' personal stories from the longitudinal interview data, which was in a 'non-storied' form, to understand why mothers' social relations had become the way they were (Polkinghorne, 1995). However, as an interview is a joint enterprise between a participant and an interviewer, we also scrutinised interpersonal factors (e.g., tone, emphases, metaphors) and public narratives (e.g., the positions of moral and social identities) whenever these helped the interpretative process (Murray, 2000). The longitudinal analysis process was conducted such that individual cases were first analysed diachronically and then contrasted with each other (Thomson, 2007).

We began the analysis process by reading through all the interview transcripts to get a preliminary idea of participants' social relations with other local mothers. The process then continued case by case. The first author gathered all the talk related to other local mothers and organised the collected extracts into a matrix. In this matrix, different sequences (e.g., participating in a community group), related social contexts (e.g., having similar experiences to those

of another mother) and consequences (e.g., befriending another mother) were located in rows, with columns presented chronologically as the data appeared in the three waves of interviews (Whiffin, Bailey, Ellis-Hill, & Jarrett, 2014). The first author also made notes on participants' background information (e.g., relation to the area, life situation) (see Polkinghorne, 1995).

The first and second authors independently generated a baseline story for each mother based on the matrix and notes (Polkinghorne, 1995) and grouped similar stories together. The stories were grouped into different story types based on the mothers' descriptions of their social relations with other local mothers. Then, these two versions of the stories and groupings were discussed and compared by all the authors. No disagreements emerged. Lastly, each participant's final storied account was written up, and the different story types were named. Each story type was given a title to depict mothers' integration with other local mothers during the final interview.

### 3 | RESULTS

We identified three story types that defined the development of first-time mothers' social relations with other local mothers: *social integration*, *social exclusion* and *social disconnection*. Below, we present the story types and our reconstructions of each mother's story.

#### 3.1 | Social integration story

The 'social integration' story type covers the stories of three mothers. All three were well integrated with other local mothers by the time of their final interview. For example, they were in regular contact with local mothers, had friends among them and participated either face-to-face or via social media in local groups for mothers and children. The core experience of these three mothers was that they experienced similarity with other local mothers, trusted them and felt like they belonged to the same group.

It was characteristic of these participants that becoming a mother had not caused serious disruption to their lives, and they reported few difficulties in adapting to motherhood. They did not experience significant problems with their own or their child's health or well-being that might have impeded their joining with others. Thus, it was typical that they open-mindedly approached other local mothers and easily shared their experience of motherhood with them, which further deepened their experience of similarity and belonging. This experience was recognisable as a sense of 'shared identity', which helped to develop the relations in a more intimate direction, including experiences of mutual validation and support (e.g., Neville et al., 2020). Nonetheless, these mothers all looked for slightly different things from other mothers, bringing variation to their stories.

##### 3.1.1 | Saara

Saara was in her 30s and mother of a 5-month-old at the time of her first interview. She had moved into the area just before the child's birth, and she lived alone with her child. She seemed to be a confident mother and well adapted to her new motherhood as she explained: 'It suits me that I live like I have lived before. Now, I just readjust it a little bit depending on what Sofia needs'. She also mentioned that she had just joined a firstborn baby club of the local church and believed that she would find friends there: 'I believe that [friends] can be found through these church's clubs'.

In her second interview, Saara described how she had continued to attend the firstborn baby club and met a 'mother-friend', whom she found to have 'the same kind of way of being with her child' that she had and with whom she 'clicked immediately'. As a single parent, Saara often needed practical help and could receive it from this friend,

and she also reciprocally helped her. After attending the firstborn baby club for some months, both joined another church's baby club. Saara liked how confident the mothers were with their babies and how relaxed the atmosphere was: 'That kind of atmosphere suits me much better than a tensed [atmosphere]'. Saara felt that the local mothers she met in these clubs were all different in terms of socio-economic backgrounds, but as mothers, they all shared the same goals, norms and interests. In the third interview, she described her sense of commonality with these mothers as follows: 'The unifying thing is that everyone has a child, and everyone wants to take care of them in the best possible way'.

Around the time of the third interview, Saara returned to work. One of the formal groups had continued as an informal but active instant messaging group where mothers coordinated their meetings. It enabled Saara to stay connected and relate to local mothers: 'In that WhatsApp group, the mothers are still messaging that they are going to the park, asking if anyone else is coming, which is really nice'.

### 3.1.2 | Virpi

At the time of her first interview, Virpi was in her late 20s, and her child was 7 months old. She had moved into her husband's apartment and current neighbourhood about 4 years previously. She felt that motherhood had increased her self-confidence, or as she described it: 'I dare to speak up'. She actively attended various local clubs and events for mothers and children, seeking company and activities for herself and her child, explaining that 'when there is an event, my child will also be satisfied'. She found it easy to go to new groups: 'shared topics to talk about are easy to find when you have children, which is interesting' and she felt that the atmosphere among the mothers was accepting and supportive. In her second interview, she recalled her experiences with other mothers at a local club: 'I have received good tips about where to buy clothes for slim girls like my daughter, as some of the girls in that music club are slim as well [laughs]'. Virpi was happy to accept practical advice from other mothers since she felt that their children were like her child and that they could understand her challenges.

Virpi also described how she developed deep friendships with two local mothers, whom she had met in the local clubs and whom she found to be 'congenial'. With one of these mothers, she found shared interests, as the other mother also 'walks with the child's pushchair [...] and has a dog'. This active lifestyle also corresponded with Virpi's pre-motherhood identity, as she had been an athlete before becoming a mother. She described her easy relationship with the other mother-friend as 'somehow we have just clicked' and their relationship was characterised by reciprocal help with childcare: 'Ella, in turn, was there for care'.

In her last interview, Virpi mentioned how she prepared for her return to work and hoped to get her child into the same nursery where the other mothers she knew had taken their children when they returned to work, indicating her desire to follow their lead and remain socially connected to them: 'It would be fun to go [to that nursery], as there would be a lot of familiar [mothers and children]'.

### 3.1.3 | Laura

Laura was in her 30s and mother of a 6-month-old at the time of her first interview. She was originally from the same neighbourhood where she now lived with her husband and child. She mentioned her uncertainty about taking care of her child a couple of times: 'I was somehow stretched ... or somehow, it was so ... when it was so new [to me], of course'. She described her nervousness about joining a local baby club: 'It was a strain for me to go to a new place'. Her uncertainty made her curious about other mothers, and therefore she looked for their company and for validation of her understanding of motherhood (see Nolan et al., 2012). In the second interview, Laura recalled her experiences at a meeting for the parents of 6-month-old children in a child health care clinic 6 months earlier: 'There were several mothers who supported baby-led weaning, and so it was nice to hear that there were more mothers thinking that it was just ok or a good thing'.

The shared understanding of how to be a mother, described above, strengthened her confidence as a mother and supported her adaptation to her life transition. At the time of her second interview, she seemed to be well integrated with other mothers, as she described: 'I have kind of got to know the folks better now, and we have just been there in the yard [...]. I have made even more friends from the park'. She had also started to volunteer at the local family café and felt that she 'no longer stresses so much about small issues'. During her final interview, Laura was still at home with her child and expressed her happiness about her local social relations: 'You know that someone is [in the playground] most of the time if you want to go there and have a talk, which is quite nice'.

## 3.2 | Social exclusion story

Three mothers' stories fell into the 'social exclusion' story type. Although mothers actively attended various local groups and clubs for mothers and children, they did not form close relationships with other mothers. Thus, the new group memberships did not efficiently support their adaptation to the life transition. It was characteristic that these mothers experienced parenthood challenges that made them feel that their experience of what it is like to be a mother was not shared by other mothers. The fear of stigmatisation and their lack of a sense of shared identity with other mothers were associated with reluctance to self-disclose (see Choi, Henshaw, Baker, & Tree, 2005), further preventing them from getting to know others and forming intimate relationships. As a result, they remained without adequate support. However, the new group was not meaningless to them, and they engaged with it (at some level), as they kept participating in it.

### 3.2.1 | Riina

Riina was in her late 30s at the time of her first interview, and mother of a 9-month-old. She had not known any local mothers when she had started maternity leave, but she proactively looked for the company by attending local clubs and events for mothers and children, as she explained: 'I also went to the baby club ... and so ... that I would get to know [other mothers] in this area a little bit'. However, her child had serious and visible health problems, which she felt complicated building relations with other mothers and made her feel 'isolated' and like 'an outsider'. In her first interview, she pondered her difficulty with joining other mothers in the playground:

I feel that such different things are going on with those mothers [laughs]. Although there are, of course a lot of ... of course ... questions and thoughts of the same kind running through my head than are in the heads of other mothers of young children, but when there are ... there are so many extra layers to taking care of Leo, perhaps that is partly how they perceive us. Are they able to take us as peers? And on the other hand, about myself, I may think a little bit, will I get peer support or something if the things they are pondering or the things that are challenging or bring joy in everyday life are different for them and for me?

The extract illustrates both Riina's willingness to become accepted as a peer by other mothers and her feeling that others could not share her experience of motherhood which made her doubt their ability to support her. Likewise, her inability to share other mothers' experiences prevented her from really joining them: 'So then those [interaction situations] are a little bit like ... that, well, ... I do not have anything to give [laughs] to this conversation because somehow it does not concern me'. In her third interview, Riina reported having no friends among local mothers with whom she could meet outside formal groups: 'Maybe I have been somehow unable to approach those people so that [a relationship] would have deepened to a kind of friendship'. Nevertheless, she still reported looking for their company in empty playgrounds: 'Often there [in the playgroup] is no-one else but perhaps someone [unknown] [...] So, apparently, we are there somehow at the wrong time'.

### 3.2.2 | Teija

Teija was in her mid-30s and mother of a 9-month-old at the time of her first interview. She had just moved to the area and bought an apartment with her husband. She explained that her pregnancy had been problematic, she had experienced a traumatic birth and she had difficulties adapting to motherhood: 'Somehow motherhood felt really unfamiliar [to me]'. Therefore, she participated in formal peer support groups within social services. She also sought support from other mothers at local clubs. During the first interview, Teija described her experience at one of these clubs:

Somehow, it feels like no one else in that group talks about tiredness or depression or any other negative feelings of motherhood. And that creates the feeling that no one else has those [feelings], and then when you say something about them, you feel even more of an outsider.

Like Riina, Teija also experienced herself as 'an outsider' and felt that other mothers did not share her experience of what it is like to be a mother. Furthermore, she experienced that the mothers did not want to talk about their difficult experiences or that they dwelt in an unrealistic 'baby bubble', into which Teija had difficulty entering. She pondered whether this superficiality could be related to the lack of intimacy among the mothers: 'Is it that those [mothers] experience, in a way, that the group is not intimate enough?' However, in the third interview, she described how her difficulties had lessened, and she felt she could be more like other mothers who talked about less serious issues, such as children's clothing: 'I myself have become more of a mother who talks about mittens'.

Through her active attendance at local clubs, she eventually gained access to a group of local mothers organised through an instant messaging group. This group provided her with some company and advice but not with real friends or the kind of emotional support she had hoped: 'But that [instant messaging group] is not a kind of a friends' [group], where you would kind of actively discuss how your day is all of the time'. In the third interview, she recounted how she had been rejected by other mothers and felt stigmatised when she had talked about her hard experiences. She had felt emotionally alone after the formal peer support group provided by social services ended: '[the end of meetings] has forced me to survive alone with those hard emotions'.

### 3.2.3 | Eveliina

At the time of her first interview, Eveliina was in her mid-30s, and her child was 3 months old. She had lived in the area for 4 years but had not known any local mothers before her own pregnancy. Her child had health and sleep problems, which challenged her adaptation to motherhood: 'You are so tight here at home, and you also always have a small threshold to go somewhere, especially if my child has a bad day'. She also repeatedly mentioned her shyness and reported that as an adult she had not made new friends other than at work. However, she believed that socialising with other mothers and children was her duty as a mother, and she 'forced' herself to attend various local groups, clubs and events for mothers and children. She became acquainted with other local mothers, but in the third interview, she reported that 'the kind of deeper friendship has not evolved with [mothers] living here'. When asked about her preferences for a mother-friend in the same interview, she described a hypothetical ideal mother-friend who could accept her as the imperfect mother she felt she was:

One you can invite to your home when it's messy, and the child is screaming, and you don't even have clothes on. Someone easy-going who just understands that everything does not need to be perfect [laughs]. You do not need to get stressed. And, of course, someone you can ask for advice - advice and who can sometimes spend time helping.



It seems that Eveliina felt like she could not be herself among other mothers and she doubted their willingness to understand her imperfect motherhood. Although she hoped to get help from the hypothetical mother-friend, the lack of intimacy with local mothers and a fear of stigmatisation prevented her from making disclosures and turning to local mothers for social support: 'Perhaps there would have been more like that kind of [mutual help among the local mothers] if one had felt in need of it'. Although other mothers offered her company and she continued to attend several local clubs during her last interview, her relations with them were shallow and insufficient: 'It is sad that I really do not have a kind of mother [friend] with whom I can meet regularly'.

### 3.3 | Social disconnection story

The 'social disconnection' story type was defined by an even deeper disconnection from other mothers living in the area. It included the stories of two mothers, who were almost completely disconnected with other local mothers at the time of their third interview. They became disconnected through different pathways, but both experienced their identity as incompatible with the perceived identity of other local mothers. This perceived motherhood of others did not correspond to their understanding of how to be a mother, underlining their sense of alienation and disidentification with this potential new group. In particular, they both had a strong sense of maternal identity, which was well integrated with their pre-motherhood identity. Unlike the mothers in the 'social exclusion' story, who were concerned about other mothers' understanding and acceptance of their motherhood, these mothers showed no fear of stigmatisation, and they rejected the version of motherhood identity that they believed other local mothers shared because it threatened the continuity of their own identity.

#### 3.3.1 | Tuuli

During her first interview, Tuuli was in her mid-20s, and her child was 7 months old. She had moved to the newly built neighbourhood a year before and bought an apartment with her husband. She described how she rejected all formal groups for mothers and children because she did not find them 'necessary'. Nonetheless, her first interview revealed that she was very active, establishing social media groups and taking the lead in organising face-to-face meetings for mothers with similar interests to hers across the country and for local families as she 'itched' to build a 'family-centred community' there.

In the second interview, she described how she had continued organising meetings through the local social media group, but no deeper relationships had evolved with the local mothers: 'They haven't begun to evolve in any way'. She had also attended one local club for mothers and children and met a new mother-friend there. However, in the third interview, she reported that she had felt like 'an outsider' in the group and had quit after only a few attendances. She did not mention her new mother-friend anymore. In the same interview, she concluded her experiences of building social relations with other local mothers as follows: 'But there is no one for me here. I have tried several times and been really active but nothing has come of it, so that's it then'.

Her reflections illustrated both her strong sense of agency and her deep frustration. Below, she explains her relations with other local mothers even more explicitly:

Some average mothers' stories do not interest me at all; I do not have anything to say. And then when I say something, I appear like some totally crazy hippy, even if in my opinion I am a totally normal [laughs] person [...] I don't want [laughs] that kind of middle-class white life that much.

On the one hand, Tuuli seemed to look down upon the other local mothers, but on the other hand, she felt they did not respect her either. The way she perceived the 'middle-class white' local mothers did not correspond to her goals and interests as a white mother with environmentalist values or to her understanding of how to be a mother. Therefore, she felt unable to be herself among them: 'I know that I stand up for my way of life, but when you go to [the yard, among other neighbouring mothers], it feels like you have entered some other reality [laughs]'. She explained during the last interview that these experiences had partly influenced her decision of moving out of the area and how she avoided contacts with local mothers: 'I almost always go there, to the forest, just [laughs] because no-one is there'.

### 3.3.2 | Essi

Essi was in her mid-30s and mother of an 8-month-old at the time of her first interview. She felt that she did not need any new people in her life and that her young child did not need the company of other children either. She spent time with her old friends, who lived in different parts of the city. However, in the third interview she recalled how she had started to miss the company of local mothers when her child's rhythm had changed and travelling with her had become more challenging: 'It bothers me perhaps that we didn't go to those meetings organised by the child health care clinic because now, afterwards, I'm thinking, damn, it would have been just [laughs] the place where you could have met those people'.

Although she did regret not participating in meetings for local mothers, she justified her former passivity by referring to her experience of dissimilarity from local mothers: 'But on the other hand, we had that meeting for the parents of 6-month-old children where there were mothers with children exactly the same age. There you could see it. We were all really different'.

She also illustrated her disidentification with local mothers by telling a story about her best friend, who had succeeded in making friends at equivalent meetings in her own neighbourhood, where participants had included 'a lot of similar mothers [...] educated and well-off [...] mostly native Finns' – unlike in Essi's neighbourhood, which she described (rather euphemistically) as a 'more colourful area'.

Essi perceived that local mothers did not correspond to her goals and interests as an educated and well-off mother, and she considered that building social relations with other mothers demanded resources that she was unwilling to invest in these local mothers: 'But if totally random [mothers] attend [the mothers' meeting place], it does not necessarily commit you because you'll never know what you get and whether it is worth it'. She strongly expressed wanting to be 'something more than a mother', and described in the third interview how relating to other mothers threatened her identity: 'I have also been afraid of those other mothers [laughs] because I'm scared that I'll drift into discussing those mother issues or baby issues'.

Instead of building relations with local mothers during her maternity leave, she participated in networks and workshops that would support her career development. In the third interview, she recounted that she had started studying, and her child had started attending a nursery earlier than she had initially intended. In that nursery, she did not know other children's parents, which illustrated her poor integration with the local community: 'Normally, when I have taken or picked up Samuel at [the nursery], I have just stumbled upon [...] fathers to whom I try to say hi [...] and also some mothers [...] but they reply really spiritlessly'.

## 4 | DISCUSSION AND CONCLUSIONS

In this article, we have explored how other mothers living nearby can provide a meaningful new group for first-time mothers. We have explained that while all participants recognised other local mothers as a potential group, only some participants became well integrated with them. We identified three story types that show how new mothers'

meaningful integration with other local mothers is established through active attendance in local groups and through the experience that other mothers share similar experiences, goals and interests. In doing so, we showed that the social identity approach (Haslam et al., 2018) can offer a meaningful theoretical perspective, synthesising prior findings and shedding light on the facilitators and barriers to new mothers' social integration.

Our findings provide support for SIMIC (Haslam et al., 2018; Iyer et al., 2009) by showing how the compatibility between old and new social identities can facilitate the gain of new group membership in the context of new motherhood. The possibility of realising pre-motherhood goals and interests with other mothers enabled the development of meaningful social relations. Otherwise, if the expectations of other mothers threatened our participants' self-definitions, they disidentified with other mothers and privileged identity continuity over social integration.

Moreover, our findings extend SIMIC research by clarifying the conditions under which new group memberships support or hinder wellbeing in life transitions. Some recent quantitative studies have found that new group memberships do not necessarily enhance mental well-being or life-satisfaction in times of transition (Cruwys et al., 2020; Seymour-Smith et al., 2017). We found that new group membership offered adequate support and a sense of belonging specifically when mothers experienced similarity with other mothers, that is, when they felt as if other mothers shared their understanding of how to be a mother and shared their experience of what it is like to be a mother. These experiences facilitated the development of a sense of sharing a common identity of motherhood. In a manner akin to that outlined by Neville et al. (2020) in relation to crowd identities, a sense of 'shared identity' of motherhood was reported to lead to a feeling of relational intimacy, which in turn facilitated group members behaving in a more positive and supportive fashion towards each other (Neville et al., 2020).

It was also notable that even those participants who experienced disruption in their transition to motherhood and did not form close relationships with other local mothers still routinely joined them, looked for their company and experienced a fear of stigmatisation within the group. This suggests that the group was not meaningless to them and that they seemed to even identify with it at some level (see also Kearns, Muldoon, Msetfi, & Surgenor, 2015; Kellezi & Reicher, 2012). Nonetheless, because of a lack of intimacy with other mothers, these 'socially excluded' mothers felt that they remained without adequate support in the group. These findings are in line with previous studies in the context of couple relationships that have discovered that relational intimacy is associated with need fulfilment (e.g., Prager & Buhrmester, 1998; Theiss & Solomon, 2008). According to Neville et al. (2020), relational intimacy involves reciprocal trust, respect and coactions such as help and support, which enhance need fulfilment. Thus, even though our participants seemed to look for relational intimacy with other mothers, their different maternal experiences made them unable to trust others' reciprocity. Finally, our findings support the previous studies conducted in formal groups for new mothers that suggest that the ability of mothers to meaningfully relate to other mothers can be limited when having children is the only commonality shared between them (e.g., Davies & Harman, 2017; Peters & Skirton, 2013). In other words, simply belonging to the common social category of mothers may not be enough for the development of relational intimacy. Our study suggests, however, that common experiences and similar understandings of motherhood can support the development of relational intimacy.

From a practical viewpoint, our results suggest that mothers who experience that their motherhood somehow deviates from others' assumed motherhood identity can remain poorly integrated with them. Such experiences may illustrate the negative effects of the dominant cultural narratives of motherhood, which tend to focus on 'optimistic stories' and 'good motherhood', creating stereotypical expectations of motherhood for new mothers (e.g., Miller, 2007). Therefore, what is needed is the cultivation of more benignant and inclusive narratives of motherhood that suggest that uncertainty, tiredness and incompleteness are normal parts of mothering (see also, e.g., Sevón, 2011). From the perspective of SIMIC, these mothers may benefit from joining peer support groups with mothers who share similar experiences and with whom they may develop a sense of shared identity and feel relational intimacy. Participation in such groups may then provide mothers with resources to join other groups in a self-perpetuating 'virtuous cycle' (Wakefield, Bowe, Kellezi, McNamara, & Stevenson, 2019). For example, sharing stressful mothering experiences in a peer support group can reduce maternal uncertainty and fear of stigmatisation, as their 'deviant' experiences become normalised, which can further encourage them to integrate with other mothers.

A relatively small sample of ethnic majority mothers interviewed in this study allowed us to conduct an in-depth multiple case study and to illustrate the variability of experiences within story types. However, analysing a more diverse sample of mothers, including for instance ethnic minority mothers, could possibly have produced more story types or more variability within the story types identified in this study. In addition, the recruitment procedures of this study may not have reached those new mothers who are the most socially vulnerable. It is possible, for example, that some new mothers are isolated in their homes without any real connections with other local mothers. A more proactive recruitment strategy may be needed to reach these mothers and motivate their participation. This study focused on new mothers' social integration, and in line with this, participants were interviewed for the first time when some months had passed since the birth of their first child. However, transition to motherhood and related social change begins already in pregnancy. Thus, future studies could expand the exploration of mothers' social integration to a pre-birth period and follow mothers already from pregnancy to childbirth and child raising to cover the whole period of transition.

To conclude, using an advanced longitudinal qualitative method, we showed that the perception of having a common understanding of how to be a mother as well as shared experiences of what it is like to be a new mother with other mothers in a local neighbourhood led to greater and more meaningful social integration for new mothers. Consequently, mothers who experience atypical challenges in adapting to motherhood also experience difficulties with integrating with other mothers and remain without the support they greatly need for adaptation. Further research should explore how to harness social identity processes to effectively support those new mothers who are most vulnerable to the social losses accompanying the transition to motherhood.

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## CONFLICT OF INTEREST

The authors have no conflict of interest to report.

## ETHICS STATEMENT

This research has received a positive ethical statement of the ethical review from The Ethics Committee of the Tampere Region, Finland.

## ENDNOTE

<sup>1</sup> Initially nine first-time mothers participated in the study. One of the mothers did not participate in the last interview. This mother was excluded from the final sample because the last interview afforded essential information about mothers' social integration.

## DATA AVAILABILITY STATEMENT

The data are not publicly available.

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